

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

EMILY's List

ADDRESS (number and street) 1120 Connecticut Avenue NW Ste 1100 Washington DC 20036 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00193433

3. IS THIS REPORT NEW OR AMENDED (N) (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) [checked], May 20 (M5), Aug 20 (M8), Nov 20 (M11), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12), 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 MM/DD/YYYY in the State of

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)
Election on MM/DD/YYYY in the State of

5. Covering Period 01/01/2013 through 01/31/2013

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 Ms. Caroline Fines

Signature of Treasurer Ms. Caroline Fines [Electronically Filed] Date 09/04/2013

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

Table with 7 columns for Office Use Only

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

EMILY's List

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="2013"/>	<input type="text" value="3155672.60"/>	<input type="text" value="3155672.60"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3155672.60"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1400546.36"/>	<input type="text" value="1400546.36"/>
(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="4556218.96"/>	<input type="text" value="4556218.96"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1571902.26"/>	<input type="text" value="1571902.26"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2984316.70"/>	<input type="text" value="2984316.70"/>
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

EMILY's List

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).....	568965.00	568965.00
(ii) Unitemized	767229.71	767229.71
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1336194.71	1336194.71
(b) Political Party Committees	2500.00	2500.00
(c) Other Political Committees (such as PACs).....	28000.00	28000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1366694.71	1366694.71
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).....	33600.85	33600.85
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	250.80	250.80
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))..... ▶	1400546.36	1400546.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1400546.36	1400546.36

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	196862.30	196862.30
(ii) Non-Federal Share.....	196862.40	196862.40
(b) Other Federal Operating Expenditures	1138664.56	1138664.56
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1532389.26	1532389.26
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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	8553.00	8553.00
(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)).....	8553.00	8553.00
29. Other Disbursements	30960.00	30960.00
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)) ..	1571902.26	1571902.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1375039.86	1375039.86

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)	1366694.71	1366694.71
34. Total Contribution Refunds (from Line 28(d))	8553.00	8553.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1358141.71	1358141.71
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1335526.86	1335526.86
37. Offsets to Operating Expenditures (from Line 15, page 3).....	33600.85	33600.85
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1301926.01	1301926.01

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

Form/Schedule: F3XA
Transaction ID :

All expenditures on Schedule B, Lines 21(a) and 21(b) are to support Committee activities and are not made on behalf of specifically identified candidates. Also, all expenditures on Schedule B, Lines 21(a) and 21(b) are to support Committee activities and are not for public communication and voter drive activity containing express advocacy.

Form/Schedule:
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 578
(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)
EMILY's List

A. Mrs. Rosalind S. Abernathy
 Full Name (Last, First, Middle Initial)
 Mailing Address 2701 Pickett Rd Apt 2044
 City Durham State NC Zip Code 27705
 Date of Receipt 01 / 15 / 2013
Transaction ID : 3556587
 Amount of Each Receipt this Period 250.00
 Aggregate Year-to-Date 250.00
 Name of Employer RETIRED MD Occupation none
 Receipt For: Primary General Other (specify) ▼

B. Mr. Frederick Adair
 Full Name (Last, First, Middle Initial)
 Mailing Address 2039 East Bay Drive NE
 City Olympia State WA Zip Code 98506
 Date of Receipt 01 / 06 / 2013
Transaction ID : 3552219
 Amount of Each Receipt this Period 100.00
 Aggregate Year-to-Date 220.00
 Name of Employer retirrd Occupation retired
 Receipt For: Primary General Other (specify) ▼

C. Mr. Frederick Adair
 Full Name (Last, First, Middle Initial)
 Mailing Address 2039 East Bay Drive NE
 City Olympia State WA Zip Code 98506
 Date of Receipt 01 / 10 / 2013
Transaction ID : 3554807
 Amount of Each Receipt this Period 120.00
 Aggregate Year-to-Date 220.00
 Name of Employer retirrd Occupation retired
 Receipt For: Primary General Other (specify) ▼

SUBTOTAL of Receipts This Page (optional)..... ▶ 470.00
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 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Nancy A. Adams
 Full Name (Last, First, Middle Initial)
 Mailing Address 14518 Shaker Blvd
 City State Zip Code
 Shaker Heights OH 44120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 attorney retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3553972
 Amount of Each Receipt this Period
 250.00

B. Ms. Nancy A. Adams
 Full Name (Last, First, Middle Initial)
 Mailing Address 14518 Shaker Blvd
 City State Zip Code
 Shaker Heights OH 44120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 attorney retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 25 / 2013
Transaction ID : 3566180
 Amount of Each Receipt this Period
 250.00

C. Victoria A. Adams
 Full Name (Last, First, Middle Initial)
 Mailing Address 2330 Medford Court East
 City State Zip Code
 Fort Worth TX 76109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 homemaker n/a
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 20 / 2013
Transaction ID : 3561041
 Amount of Each Receipt this Period
 500.00

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: (check only one)	PAGE 9 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Muriel W. Adcock		Date of Receipt
Mailing Address P.O. Box 5298		<input type="text" value="01"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
Larkspur	CA	94977
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3553586
Name of Employer	Occupation	Amount of Each Receipt this Period
consultant	self	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Deirdre F. Aherne		Date of Receipt
Mailing Address 231 West 120th Street B'Mnt Apt.		<input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City	State	Zip Code
New York	NY	10017
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3562365
Name of Employer	Occupation	Amount of Each Receipt this Period
Educator	CUNY / Hostos CC	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Marcia K Allen		Date of Receipt
Mailing Address 620 Sand Hill Rd Apt. 318d		<input type="text" value="01"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City	State	Zip Code
Palo Alto	CA	94304
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3552313
Name of Employer	Occupation	Amount of Each Receipt this Period
Retired	Retired	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2250.00"/>
TOTAL 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: (check only one)	PAGE 10 OF 578
	<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)
EMILY's List

A. Dr. Maria D. Allo
Full Name (Last, First, Middle Initial)

Mailing Address 896 Shadow Creek Place

City Los Altos State CA Zip Code 94024

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

Name of Employer SURGEON(MD) Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 30 / 2013
Transaction ID : 3569482

Amount of Each Receipt this Period 1000.00

B. Ms. Suzanne Ammerman
Full Name (Last, First, Middle Initial)

Mailing Address 554 N 8th St

City River Falls State WI Zip Code 54022

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 01 / 23 / 2013
Transaction ID : 3564526

Amount of Each Receipt this Period 400.00

C. Ms. Sara Anderson
Full Name (Last, First, Middle Initial)

Mailing Address 100 South Street, Apt. 104

City Sausalito State CA Zip Code 94965

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

Name of Employer RETIRED Occupation none

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 01 / 28 / 2013
Transaction ID : 3568067

Amount of Each Receipt this Period 300.00

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: (check only one)	PAGE 11 OF 578
	<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)
EMILY's List

A. Ms. Pauline Andrews
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 5487

City Santa Monica State CA Zip Code 90409

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

Name of Employer asset manager Occupation Peoples self-employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **01 / 10 / 2013**

Transaction ID : 3554848

Amount of Each Receipt this Period **350.00**

B. Ms. Patricia L. Arbutine
Full Name (Last, First, Middle Initial)

Mailing Address 784 Cortez Ave.

City Belleair Bluffs State FL Zip Code 33770

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

Name of Employer chairman of board Occupation the silver queen inc

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **01 / 28 / 2013**

Transaction ID : 3568079

Amount of Each Receipt this Period **300.00**

C. Mrs. Janet K K. Archer
Full Name (Last, First, Middle Initial)

Mailing Address 6153 North Mattox Road

City Kansas City State MO Zip Code 64151

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

Name of Employer owner member manager Occupation R & J Archer Petroleum LLC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **01 / 19 / 2013**

Transaction ID : 3561000

Amount of Each Receipt this Period **350.00**

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: (check only one)	PAGE 12 OF 578
	<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)
EMILY's List

A. Ms. Kelly Rafferty Armstrong
 Full Name (Last, First, Middle Initial)
 Mailing Address 3320 Kahawalu Drive
 City Honolulu State HI Zip Code 96817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 24 / 2013
Transaction ID : 3565339
 Amount of Each Receipt this Period
 1000.00

B. Ms. Rosemary E. Armstrong
 Full Name (Last, First, Middle Initial)
 Mailing Address 3415 W Mullen Ave.
 City Tampa State FL Zip Code 33609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Attorney Occupation Self Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : 3558036
 Amount of Each Receipt this Period
 1000.00

C. Mr. Seth Armstrong
 Full Name (Last, First, Middle Initial)
 Mailing Address 2552 14th Avenue No. 401
 City Seattle State WA Zip Code 98119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Attorney Occupation State of Washington
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 04 / 2013
Transaction ID : 3550298
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 578
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Robert H. Armstrong		Date of Receipt M M / D D / Y Y Y Y Y 01 / 30 / 2013 Transaction ID : 3569929
Mailing Address 3320 Kahawalu Dr		Amount of Each Receipt this Period 2500.00
City Honolulu	State HI	Zip Code 96817
FEC ID number of contributing federal political committee. C		
Name of Employer Builder	Occupation Armstrong Companies	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Dr. Sandra Aronberg , M.D.		Date of Receipt M M / D D / Y Y Y Y Y 01 / 17 / 2013 Transaction ID : 3558415
Mailing Address 416 N. Bedford Dr. #300		Amount of Each Receipt this Period 1000.00
City Beverly Hills	State CA	Zip Code 90210
FEC ID number of contributing federal political committee. C		
Name of Employer Physician/Professor	Occupation self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Dr. Sona Aronian		Date of Receipt M M / D D / Y Y Y Y Y 01 / 22 / 2013 Transaction ID : 3562827
Mailing Address 14 Helme RD		Amount of Each Receipt this Period 1000.00
City Kingston	State RI	Zip Code 2881
FEC ID number of contributing federal political committee. C		
Name of Employer retired professor	Occupation retired professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	4500.00
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 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Mary Ann Aronson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1450 Post Street #902
 City San Francisco State CA Zip Code 94109
 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 ▼ 1000.00

Date of Receipt
 01 / 05 / 2013
Transaction ID : 3551331
 Amount of Each Receipt this Period
 1000.00

B. Marian Page Ashley
 Full Name (Last, First, Middle Initial)
 Mailing Address 168 East 74th Street, Apt. 1B
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer book editor Occupation retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 01 / 05 / 2013
Transaction ID : 3551902
 Amount of Each Receipt this Period
 350.00

C. Mr. Craig L Auster
 Full Name (Last, First, Middle Initial)
 Mailing Address 654 L St NE
 City Washington State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Deputy Political Director Occupation Fair Share Alliance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 01 / 05 / 2013
Transaction ID : 3550551
 Amount of Each Receipt this Period
 100.00

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 15 OF 578
(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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. Craig L Auster

Mailing Address 654 L St NE

City Washington State DC Zip Code 20002

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

Name of Employer Deputy Political Director Occupation Fair Share Alliance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 04 / 2013
Transaction ID : 3550330

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Mr. Craig L Auster

Mailing Address 654 L St NE

City Washington State DC Zip Code 20002

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

Name of Employer Deputy Political Director Occupation Fair Share Alliance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 04 / 2013
Transaction ID : 3550331

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Ms. Elizabeth A. Ayers

Mailing Address 3612 Cason St.

City Houston State TX Zip Code 77005

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

Name of Employer HOMEMAKER Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 07 / 2013
Transaction ID : 3552742

Amount of Each Receipt this Period
315.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **815.00**

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 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Kathy A. Baczko

Mailing Address 136 N Union St

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation
City Director The William J. Clinton Foundation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554719

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Ms. Nancy Hursh Bagley

Mailing Address 1235 8th Ave. W

City State Zip Code
Seattle WA 98119

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

Name of Employer Occupation
RETIRED none

Receipt For:
 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
 01 / 22 / 2013
Transaction ID : 3563597

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. Dr. Joyce Bailey

Mailing Address 405 Hamilton

City State Zip Code
Warrensburg MO 64093

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

Name of Employer Occupation
retired retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3566849

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Cedric Bainton
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 Ventura Ave
 City San Francisco State CA Zip Code 94116
 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 ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 16 / 2013
Transaction ID : 3565169
 Amount of Each Receipt this Period
 100.00

B. Mr. Cedric Bainton
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 Ventura Ave
 City San Francisco State CA Zip Code 94116
 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 ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3569993
 Amount of Each Receipt this Period
 100.00

C. Mr. Cedric Bainton
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 Ventura Ave
 City San Francisco State CA Zip Code 94116
 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 ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 07 / 2013
Transaction ID : 3553551
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
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 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Priscilla Baker
 Full Name (Last, First, Middle Initial)
 Mailing Address 4161 Arcadia Way
 City State Zip Code
 Oceanside CA 92056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED none
 Receipt For:
 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
 01 / 22 / 2013
Transaction ID : 3562825
 Amount of Each Receipt this Period
 1000.00

B. Ms. Barbara B. Balser
 Full Name (Last, First, Middle Initial)
 Mailing Address 750 Park Ave N.E. Apt 42
 City State Zip Code
 Atlanta GA 30326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Executive NA
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3559093
 Amount of Each Receipt this Period
 250.00

C. Barbee Bancroft
 Full Name (Last, First, Middle Initial)
 Mailing Address 3100 N. Sheridan Road 9C
 City State Zip Code
 Chicago IL 60657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 teacher self-employed
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 21 / 2013
Transaction ID : 3562480
 Amount of Each Receipt this Period
 250.00

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: (check only one)	PAGE 19 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Carole A. Barham		Date of Receipt M M / D D / Y Y Y Y Y 01 / 07 / 2013 Transaction ID : 3552814
Mailing Address 13782 Monaco Way		Amount of Each Receipt this Period 1000.00
City Palm Beach Gardens	State FL	Zip Code 33410
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation none	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Judith E. Barnard		Date of Receipt M M / D D / Y Y Y Y Y 01 / 15 / 2013 Transaction ID : 3556109
Mailing Address 413 W. Smuggler		Amount of Each Receipt this Period 1500.00
City Aspen	State CO	Zip Code 81611
FEC ID number of contributing federal political committee. C		
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. Ms. Tina Barnet		Date of Receipt M M / D D / Y Y Y Y Y 01 / 22 / 2013 Transaction ID : 3562801
Mailing Address 607 W End Ave. # 15A		Amount of Each Receipt this Period 300.00
City New York	State NY	Zip Code 10024
FEC ID number of contributing federal political committee. C		
Name of Employer Teacher	Occupation Assoc. to Benefit Children	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	2800.00
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 20 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Wendy Bohle Bartlett			Date of Receipt
Mailing Address 672 Linden Ave.			<input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : 3561332
Los Altos	CA	94022	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="2500.00"/>
Name of Employer	Occupation		
Software designer	HP		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2500.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Dr. Thelma F. Batten			Date of Receipt
Mailing Address 159 Avenida Majorca, Unit A			<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : 3562805
Laguna Woods	CA	92637	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="2000.00"/>
Name of Employer	Occupation		
REQUESTED	REQUESTED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2000.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Patricia Bauman			Date of Receipt
Mailing Address 2040 S Street, NW			<input type="text" value="01"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : 3554817
Washington	DC	20001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="5000.00"/>
Name of Employer	Occupation		
Executive	Bauman Foundation		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="9500.00"/>
TOTAL 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: (check only one)	PAGE 21 OF 578
	<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)
EMILY's List

A. Ms. Dorothy Baumbach
Full Name (Last, First, Middle Initial)
Mailing Address 117 Prospector Pass
City Georgetown State TX Zip Code 78633
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **01 / 30 / 2013**
Transaction ID : 3569708
Amount of Each Receipt this Period **500.00**

B. Ms. Barbara S. Bayles
Full Name (Last, First, Middle Initial)
Mailing Address 71 Faculty Pl
City Wilmington State OH Zip Code 45177
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation None
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **01 / 31 / 2013**
Transaction ID : 3570284
Amount of Each Receipt this Period **250.00**

C. Ms. Rachel R. Bayly
Full Name (Last, First, Middle Initial)
Mailing Address 509 Anne St.
City Falls Church State VA Zip Code 22046
FEC ID number of contributing federal political committee. **C**
Name of Employer Int'l Economist Occupation U.S. Dept. of the Treasury
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt **01 / 15 / 2013**
Transaction ID : 3555781
Amount of Each Receipt this Period **1000.00**

SUBTOTAL of Receipts This Page (optional)..... **1750.00**
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 22 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Carol Becker
 Full Name (Last, First, Middle Initial)
 Mailing Address 14257 Roblar Place
 City Sherman Oaks State CA Zip Code 91423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PHYSICIAN Self
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554133
 Amount of Each Receipt this Period
 300.00

B. Ms. Susan Beckerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 685 West End Avenue, Apt. 9C
 City New York State NY Zip Code 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 20 / 2013
Transaction ID : 3564645
 Amount of Each Receipt this Period
 225.00

C. Ms. Florence Beller
 Full Name (Last, First, Middle Initial)
 Mailing Address 5101 Sunrise Hills Dr
 City Fair Oaks State CA Zip Code 95628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired NA
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 05 / 2013
Transaction ID : 3551915
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00
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 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Wendy W. Benchley
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 Boudinot Street
 City State Zip Code
 Princeton NJ 8540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Counselor Princeton Borough Common Council
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : 3550484
 Amount of Each Receipt this Period
 2500.00

B. Ms. Phoebe Bender
 Full Name (Last, First, Middle Initial)
 Mailing Address 125 Euclid Avenue
 City State Zip Code
 Albany NY 12203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED none
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2013
Transaction ID : 3568539
 Amount of Each Receipt this Period
 2000.00

C. Ms. Ruth L. Benedict
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 Rock St
 City State Zip Code
 Silverton OR 97381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired psychotherapist none
 Receipt For:
 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
 01 / 03 / 2013
Transaction ID : 3552635
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 4600.00
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 24 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ruth L. Benedict		Date of Receipt
Mailing Address 105 Rock St		<input type="text" value="01"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City Silverton	State OR	Zip Code 97381
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 3565440
Name of Employer retired psychotherapist		Occupation none
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="125.00"/>
		<input type="text" value="225.00"/>

Full Name (Last, First, Middle Initial) B. Catherine Benkaim		Date of Receipt
Mailing Address 261 Reeves Drive, Ph 1		<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City Beverly Hills	State CA	Zip Code 90212
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 3569415
Name of Employer REQUESTED		Occupation REQUESTED
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"/>

Full Name (Last, First, Middle Initial) C. Ms. Cynthia Berenson		Date of Receipt
Mailing Address 220 Boylston St		<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City Boston	State MA	Zip Code 2116
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 3568064
Name of Employer REQUESTED		Occupation REQUESTED
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="300.00"/>
		<input type="text" value="300.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1425.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 25 OF 578
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Doris Bergen		Date of Receipt
Mailing Address 642 Shultz Dr		<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
Hamilton	OH	45013
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3569484
Name of Employer	Occupation	Amount of Each Receipt this Period
Professor	Miami University	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dr. Barbara H. Bergmann		Date of Receipt
Mailing Address 966 SE Sunwood Ct.		<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	Zip Code
Bend	OR	97702
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3568548
Name of Employer	Occupation	Amount of Each Receipt this Period
Requested	Requested	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Georgia Berner		Date of Receipt
Mailing Address P.O. Box 517		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
Zelienople	PA	16063
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3558198
Name of Employer	Occupation	Amount of Each Receipt this Period
President/CEO	Berner International Corp	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="3000.00"/>
TOTAL 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: (check only one)	PAGE 26 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Susan D. Berrington		Date of Receipt
Mailing Address 5920 Granby Rd.		<input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
Rockville	MD	20855
FEC ID number of contributing federal political committee.		Transaction ID : 3560546
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
Retired	Retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Lisa A. Bielefeld		Date of Receipt
Mailing Address 132 Mount Vernon St.		<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code
Arlington	MA	2476
FEC ID number of contributing federal political committee.		Transaction ID : 3550403
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Software Engineer	Lucent	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mrs. Marion M. Bierwirth		Date of Receipt
Mailing Address 300 Albro Lane		<input type="text" value="01"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
Lawrence	NY	11559
FEC ID number of contributing federal political committee.		Transaction ID : 3569996
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Joan Bingham
 Full Name (Last, First, Middle Initial)
 Mailing Address 39 East 79th St #14b
 City New York State NY Zip Code 10075
 Date of Receipt 01 / 05 / 2013
Transaction ID : 3551176
 Amount of Each Receipt this Period 500.00
 Aggregate Year-to-Date 500.00
 Name of Employer editor/publisher Occupation Grove/Atlantic Press
 Receipt For: Primary General Other (specify) Other (specify) ▼

B. Mr. Charles W Blochberger
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 4217
 City Palm Springs State CA Zip Code 92263
 Date of Receipt 01 / 18 / 2013
Transaction ID : 3559854
 Amount of Each Receipt this Period 100.00
 Aggregate Year-to-Date 250.00
 Name of Employer retired Occupation retired
 Receipt For: Primary General Other (specify) ▼

C. Mr. Charles W Blochberger
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 4217
 City Palm Springs State CA Zip Code 92263
 Date of Receipt 01 / 06 / 2013
Transaction ID : 3552372
 Amount of Each Receipt this Period 150.00
 Aggregate Year-to-Date 250.00
 Name of Employer retired Occupation retired
 Receipt For: Primary General Other (specify) ▼

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: (check only one)	PAGE 28 OF 578
	<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)
EMILY's List

A. Ms. Karen Blumenthal
Full Name (Last, First, Middle Initial)
Mailing Address 7 High Point Lane
City Scarsdale State NY Zip Code 10583
FEC ID number of contributing federal political committee. **C**
Name of Employer Policy Advocate Occupation Student Advocacy
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 23 / 2013
Transaction ID : 3564522
Amount of Each Receipt this Period
250.00

B. Col. Billie M. Bobbitt
Full Name (Last, First, Middle Initial)
Mailing Address 10701 N. La Reserve Drive, #227
City Lakeside State AZ Zip Code 85929
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired USAF Occupation Retired USAF
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 08 / 2013
Transaction ID : 3554413
Amount of Each Receipt this Period
5000.00

C. Ms. Elspeth G. Bobbs
Full Name (Last, First, Middle Initial)
Mailing Address 630 E Alameda St
City Santa Fe State NM Zip Code 87501
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 28 / 2013
Transaction ID : 3566917
Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 6250.00
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 29 OF 578
	<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)
EMILY's List

A. Ms. Barbara Bogue
Full Name (Last, First, Middle Initial)

Mailing Address 7316 Rippon Road

City Alexandria State VA Zip Code 22307

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

Name of Employer self employed Occupation self

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
01 / 15 / 2013
Transaction ID : 3555787

Amount of Each Receipt this Period
250.00

B. Mr. Victor Bollman
Full Name (Last, First, Middle Initial)

Mailing Address 15735 NE Browndale Farm Road

City Aurora State OR Zip Code 97002

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

Name of Employer RETIRED Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
01 / 24 / 2013
Transaction ID : 3565619

Amount of Each Receipt this Period
300.00

C. Ms. Paul Booth
Full Name (Last, First, Middle Initial)

Mailing Address 3724 Benton St NW

City Washington State DC Zip Code 20007

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
01 / 22 / 2013
Transaction ID : 3562767

Amount of Each Receipt this Period
1000.00

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 30 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Judith Borcz

Mailing Address 75 Fox Hollow Lane

City State Zip Code
Redwood City CA 94062

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

Name of Employer Occupation
HOUSEWIFE Cunulogic

Receipt For:
 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
 01 / 28 / 2013
Transaction ID : 3568057

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. Dr. Drucy S. Borowitz

Mailing Address 50 Dauphin Drive

City State Zip Code
Williamsville NY 14221

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

Name of Employer Occupation
Physician Childrens Hosp./Buffalo

Receipt For:
 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
 01 / 31 / 2013
Transaction ID : 3570439

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. Ms. Kay W. Bosselman

Mailing Address 2715 Woodbine Ave.

City State Zip Code
Evanston IL 60201

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 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
 01 / 23 / 2013
Transaction ID : 3564530

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. David Bower
 Full Name (Last, First, Middle Initial)
 Mailing Address 868 Boyce Avenue
 City Palo Alto State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 23 / 2013
Transaction ID : 3565624
 Amount of Each Receipt this Period
 250.00

B. Ms. Judy C. Bozeman
 Full Name (Last, First, Middle Initial)
 Mailing Address 603 Pinehaven Dr
 City Houston State TX Zip Code 77024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2013
Transaction ID : 3569711
 Amount of Each Receipt this Period
 1000.00

C. Ms. Alice Bradley
 Full Name (Last, First, Middle Initial)
 Mailing Address 3138 Beacon DR
 City Port Charlotte State FL Zip Code 33952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED TEACHER Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 23 / 2013
Transaction ID : 3564534
 Amount of Each Receipt this Period
 300.00

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: (check only one)	PAGE 32 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Jane Eisner Bram , Ph.D.		Date of Receipt M M / D D / Y Y Y Y Y 01 / 15 / 2013 Transaction ID : 3556589
Mailing Address 124 East 84th Street		Amount of Each Receipt this Period 250.00
City New York	State NY	Zip Code 10028
FEC ID number of contributing federal political committee. C		
Name of Employer Psychotherapist	Occupation self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mrs. Cheryl A. Brant		Date of Receipt M M / D D / Y Y Y Y Y 01 / 16 / 2013 Transaction ID : 3557778
Mailing Address 3157 Breaker Dr		Amount of Each Receipt this Period 250.00
City Ventura	State CA	Zip Code 93003
FEC ID number of contributing federal political committee. C		
Name of Employer writer	Occupation self-employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mr. Richard Brashear		Date of Receipt M M / D D / Y Y Y Y Y 01 / 31 / 2013 Transaction ID : 3570440
Mailing Address Po Box 3974		Amount of Each Receipt this Period 500.00
City Albany	State NY	Zip Code 12203
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation State of NY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

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 33 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Karen Brashears

Mailing Address 119 Hawkins Circle

City State Zip Code
Wheaton IL 60189

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

Name of Employer Occupation
Homemaker N/A

Receipt For:
 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
 01 / 15 / 2013
Transaction ID : 3555991

Amount of Each Receipt this Period
350.00

Full Name (Last, First, Middle Initial)
B. Dr. Mary A Braunagel-Brown

Mailing Address 7321 Roaring Springs Dr.

City State Zip Code
Austin TX 78736

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

Name of Employer Occupation
Retired N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 05 / 2013
Transaction ID : 3550692

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Ms. Margaret L. Brennan

Mailing Address 135 Grace Trl.

City State Zip Code
Ash Flat AR 72513

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 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
 01 / 28 / 2013
Transaction ID : 3568072

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Susan Z. Breyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 270 Family Farm Rd
 City Woodside State CA Zip Code 94062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Artist Occupation self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 02 / 2013
Transaction ID : 3550067
 Amount of Each Receipt this Period
 250.00

B. Ms. Elaine A. Bridges
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 3605
 City San Angelo State TX Zip Code 76902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 11 / 2013
Transaction ID : 3554790
 Amount of Each Receipt this Period
 2500.00

C. Dr. Donna Brodd
 Full Name (Last, First, Middle Initial)
 Mailing Address 2508 Melaway Drive
 City Richmond State VA Zip Code 23228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3566930
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00
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 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Carol Bromer
 Full Name (Last, First, Middle Initial)
 Mailing Address 6521 creek drive
 City edina State MN Zip Code 55439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2013
Transaction ID : 3568800
 Amount of Each Receipt this Period
 250.00

B. Ms. Joanie Bronfman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1731 Beacon Street
 Apartment 517
 City Brookline State MA Zip Code 2445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Consultant Self Employed
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 09 / 2013
Transaction ID : 3554488
 Amount of Each Receipt this Period
 2000.00

C. Ms. Mary C. Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 1624 Grand Avenue
 City Kalamazoo State MI Zip Code 49006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 retired none
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2013
Transaction ID : 3569557
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 578
	<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)
EMILY's List

A. Ms. Ellen Brown
Full Name (Last, First, Middle Initial)
Mailing Address 3549 Julie Court
City Palo Alto State CA Zip Code 94306
FEC ID number of contributing federal political committee. **C**
Name of Employer Hospice Medical Director Occupation Pathways Hospice
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **01 / 18 / 2013**
Transaction ID : 3559934
Amount of Each Receipt this Period **500.00**

B. Ms. Kathan Brown
Full Name (Last, First, Middle Initial)
Mailing Address 75 Folsom St., Apt. 1803
City San Francisco State CA Zip Code 94105
FEC ID number of contributing federal political committee. **C**
Name of Employer publisher Occupation Crown Point Press
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt **01 / 07 / 2013**
Transaction ID : 3553304
Amount of Each Receipt this Period **1000.00**

C. Ms. Adriane Brown
Full Name (Last, First, Middle Initial)
Mailing Address 600 Rainbow Drive #138
City Mountain View State CA Zip Code 94041
FEC ID number of contributing federal political committee. **C**
Name of Employer Quality Control Anal Occupation Surplus Line Association of CA
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1500.00**

Date of Receipt **01 / 08 / 2013**
Transaction ID : 3554212
Amount of Each Receipt this Period **1500.00**

SUBTOTAL of Receipts This Page (optional)..... **3000.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 37 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Susan L. Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 1541 Weymount Pl.
 City Santa Ana State CA Zip Code 92705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired Educator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : 3550261
 Amount of Each Receipt this Period
 2500.00

B. Ms. Peggy R. Browning
 Full Name (Last, First, Middle Initial)
 Mailing Address 7373 E 29th St N Apt E205
 City Wichita State KS Zip Code 67226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3566919
 Amount of Each Receipt this Period
 250.00

C. Ms. Janet Brown-Liberman
 Full Name (Last, First, Middle Initial)
 Mailing Address 528 Lake Sherwood DR
 City Lake Sherwood State CA Zip Code 91361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3567187
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 578
	<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)
EMILY's List

A. Ms. Joanne E. Bruggemann
Full Name (Last, First, Middle Initial)

Mailing Address 3 Lido Circle

City Redwood City State CA Zip Code 94065

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

Name of Employer retired Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2013

Transaction ID : 3565346

Amount of Each Receipt this Period
 250.00

B. Mrs. Margaret B. Bunce
Full Name (Last, First, Middle Initial)

Mailing Address 1970 Silverleaf Cir Unit 326

City Carlsbad State CA Zip Code 92009

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

Name of Employer RETIRED Occupation none

Receipt For:
 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
 01 / 22 / 2013

Transaction ID : 3562824

Amount of Each Receipt this Period
 1000.00

C. Ms. Meaghan Burdick
Full Name (Last, First, Middle Initial)

Mailing Address 1415 N. Dearborn # 4C

City Chicago State IL Zip Code 60610

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

Name of Employer Marketing Director Occupation PIC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 02 / 2013

Transaction ID : 3550027

Amount of Each Receipt this Period
 250.00

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: (check only one)	PAGE 39 OF 578
	<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)
EMILY's List

A. Anna Burger
Full Name (Last, First, Middle Initial)

Mailing Address 500 Dahlia St NW

City Washington State DC Zip Code 20012

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

Name of Employer CONSULTANT Occupation AB ACTION LLC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 19 / 2013
Transaction ID : 3560520

Amount of Each Receipt this Period
 1000.00

B. Ms. Janis M. Burgess
Full Name (Last, First, Middle Initial)

Mailing Address 747 Parker Avenue

City Ontonagon State MI Zip Code 49953

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

Name of Employer Probate Judge Occupation Ontonagon County

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2013
Transaction ID : 3568803

Amount of Each Receipt this Period
 250.00

C. Mr. William T. Burke
Full Name (Last, First, Middle Initial)

Mailing Address 7735 57th Ave NE

City Seattle State WA Zip Code 98115

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3563604

Amount of Each Receipt this Period
 300.00

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: (check only one)	PAGE 40 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Hillary Butler		Date of Receipt
Mailing Address 21 Charlton Street PH- C		<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City New York	State NY	Zip Code 10014
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3562773
Name of Employer psychotherapist	Occupation self	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
	<input type="text" value="2500.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Judith E Campbell		Date of Receipt
Mailing Address 54 Samson Ave		<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City Madison	State NJ	Zip Code 7940
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3555597
Name of Employer Retired Exec	Occupation New York Life Insurance	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Cristina Campbell		Date of Receipt
Mailing Address 3108 claremont ave		<input type="text" value="01"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City Berkeley	State CA	Zip Code 94705
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3559977
Name of Employer retired	Occupation retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
	<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="3000.00"/>
TOTAL 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 41 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Judith F. Campbell
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 Holling Avenue
 City Baltimore State MD Zip Code 21210
 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 ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 19 / 2013
Transaction ID : 3560559
 Amount of Each Receipt this Period
 350.00

B. Ms. Elizabeth A. Carlin
 Full Name (Last, First, Middle Initial)
 Mailing Address Post Office Box 750
 City Point Reyes Station State CA Zip Code 94956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 19 / 2013
Transaction ID : 3561414
 Amount of Each Receipt this Period
 1000.00

C. Ms. Velaine V. Carnall
 Full Name (Last, First, Middle Initial)
 Mailing Address 5333 7th Ave
 City Countryside State IL Zip Code 60525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 23 / 2013
Transaction ID : 3563992
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2350.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 42 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Robin Carter
 Full Name (Last, First, Middle Initial)
 Mailing Address 6002 Edgewater Dr.
 City State Zip Code
 Corpus Christi TX 78412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 24 / 2013
Transaction ID : 3565341
 Amount of Each Receipt this Period
 1000.00

B. Ms. Kevin A Cartwright
 Full Name (Last, First, Middle Initial)
 Mailing Address 3511 Greenfield Place
 City State Zip Code
 Carmel CA 93923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Volunteer None
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 05 / 2013
Transaction ID : 3551822
 Amount of Each Receipt this Period
 1000.00

C. Mrs. Dennis Cassettari
 Full Name (Last, First, Middle Initial)
 Mailing Address 15709 Sleepy Oak Rd.
 City State Zip Code
 Chino Hills CA 91709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 30 / 2013
Transaction ID : 3569706
 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:	PAGE 43 OF 578
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Elizabeth Betty Castor
Full Name (Last, First, Middle Initial)
Mailing Address 1298 Millstream Rd.
City Tallahassee State FL Zip Code 32312
FEC ID number of contributing federal political committee. **C**
Name of Employer educator Occupation self employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
01 / 30 / 2013
Transaction ID : 3569794
Amount of Each Receipt this Period
1000.00

B. Dr. John I. Celenza
Full Name (Last, First, Middle Initial)
Mailing Address 49 Sweetwater Ave
City Bedford State MA Zip Code 1730
FEC ID number of contributing federal political committee. **C**
Name of Employer Professor Occupation Boston University
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
01 / 18 / 2013
Transaction ID : 3558524
Amount of Each Receipt this Period
350.00

C. Ms. Susan Chadick
Full Name (Last, First, Middle Initial)
Mailing Address 300 Park Avenue 25th Floor Ny
City Ny State NY Zip Code 10022
FEC ID number of contributing federal political committee. **C**
Name of Employer Co-CEO Occupation chadick ellig
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
01 / 07 / 2013
Transaction ID : 3553322
Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1850.00
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 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Holly H. Childs
 Full Name (Last, First, Middle Initial)
 Mailing Address 1126 Reed Valley Rd
 City Fayetteville State AR Zip Code 72704
 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 ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3559508
 Amount of Each Receipt this Period
 250.00

B. Mark Chivvis
 Full Name (Last, First, Middle Initial)
 Mailing Address 210 Chrisman Rd.
 City Christiansburg State VA Zip Code 24073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer student Occupation Virginia Tech
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3559017
 Amount of Each Receipt this Period
 250.00

C. Ms. Patricia W. Christensen
 Full Name (Last, First, Middle Initial)
 Mailing Address 183 Third Avenue
 City Salt Lake City State UT Zip Code 84103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Attorney Occupation Parr Brown Gee & Loveless
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2013
Transaction ID : 3561921
 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: (check only one)	PAGE 45 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Paula Clapp		Date of Receipt MM / DD / YYYY 01 / 21 / 2013 Transaction ID : 3562329
Mailing Address 4501 Bertona St		Amount of Each Receipt this Period 1000.00
City Seattle	State WA	Zip Code 98199
FEC ID number of contributing federal political committee. C	Name of Employer community volunteer	Occupation none
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Judith Clark		Date of Receipt MM / DD / YYYY 01 / 08 / 2013 Transaction ID : 3554257
Mailing Address 243 Promenade Avenue		Amount of Each Receipt this Period 250.00
City Warwick	State RI	Zip Code 2886
FEC ID number of contributing federal political committee. C	Name of Employer Portrait Painter	Occupation Self
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Linda L. Clark		Date of Receipt MM / DD / YYYY 01 / 22 / 2013 Transaction ID : 3562820
Mailing Address 551 Milton Ct., Unit 101		Amount of Each Receipt this Period 1000.00
City Long Beach	State CA	Zip Code 90803
FEC ID number of contributing federal political committee. C	Name of Employer RETIRED	Occupation none
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 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 46 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jane Scott Cleary
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 MacRae DR
 City Grove City State PA Zip Code 16127
 Date of Receipt 01 / 22 / 2013
 Transaction ID : 3563062
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

B. Dr. James A. Clever
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 Glen Dr.
 City Mill Valley State CA Zip Code 94941
 Date of Receipt 01 / 22 / 2013
 Transaction ID : 3563605
 Amount of Each Receipt this Period 350.00
 FEC ID number of contributing federal political committee. C
 Name of Employer physician, retired Occupation self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

C. Ms. Leslie Close
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 244
 City Sagaponack State NY Zip Code 11962
 Date of Receipt 01 / 05 / 2013
 Transaction ID : 3551284
 Amount of Each Receipt this Period 500.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Landscape historian Occupation Self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 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: PAGE 47 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Gladys M. Cohen
 Full Name (Last, First, Middle Initial)
 Mailing Address 124 Wyndover Lane
 City State Zip Code
 Stamford CT 6902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired N?A
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 14 / 2013
Transaction ID : 3556508
 Amount of Each Receipt this Period
 125.00

B. Ms. Gladys M. Cohen
 Full Name (Last, First, Middle Initial)
 Mailing Address 124 Wyndover Lane
 City State Zip Code
 Stamford CT 6902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired N?A
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3558655
 Amount of Each Receipt this Period
 150.00

C. Ms. Deborah J. Cohen
 Full Name (Last, First, Middle Initial)
 Mailing Address 1140 Beacon St Apt 302
 City State Zip Code
 Brookline MA 2446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Education MIT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2013
Transaction ID : 3556572
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
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 48 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Marcia Cohen		Date of Receipt MM / DD / YYYY 01 / 23 / 2013 Transaction ID : 3565096
Mailing Address 3000 Olympic Blvd Suite 1310		Amount of Each Receipt this Period 500.00
City Santa Monica	State CA	
Zip Code 90404		Aggregate Year-to-Date ▼ 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Self	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Ms. Phyllis J. Cohen		Date of Receipt MM / DD / YYYY 01 / 26 / 2013 Transaction ID : 3566742
Mailing Address 6619 Mercer Street		Amount of Each Receipt this Period 2500.00
City Houston	State TX	
Zip Code 77005		Aggregate Year-to-Date ▼ 2500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Attorney	Occupation None	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Ms. Carola V. Cohn		Date of Receipt MM / DD / YYYY 01 / 11 / 2013 Transaction ID : 3554921
Mailing Address 1547 Mt Olivet Rd		Amount of Each Receipt this Period 300.00
City Zirconia	State NC	
Zip Code 28790		Aggregate Year-to-Date ▼ 300.00
FEC ID number of contributing federal political committee. C		
Name of Employer retired employment counselor	Occupation none - I'm retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	3300.00
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 49 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Lila A. Coleburn		Date of Receipt MM / DD / YYYY 01 / 18 / 2013 Transaction ID : 3558740
Mailing Address #3c 395 Riverside Drive		Amount of Each Receipt this Period 250.00
City New York	State NY	
Zip Code 10025		Aggregate Year-to-Date ▼ 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer psychologist	Occupation self	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Ms. Joan L. Coles		Date of Receipt MM / DD / YYYY 01 / 15 / 2013 Transaction ID : 3556111
Mailing Address 1357 3rd Avenue		Amount of Each Receipt this Period 250.00
City Salt Lake City	State UT	
Zip Code 84103		Aggregate Year-to-Date ▼ 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer retired	Occupation n/a	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Mr. George C. Comden		Date of Receipt MM / DD / YYYY 01 / 23 / 2013 Transaction ID : 3564124
Mailing Address PO Box 117		Amount of Each Receipt this Period 350.00
City Acme	State MI	
Zip Code 49610		Aggregate Year-to-Date ▼ 350.00
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation none	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jane Condon		Date of Receipt
Mailing Address 38 Close RD		<input type="text" value="01"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
Greenwich	CT	6831
FEC ID number of contributing federal political committee.		Transaction ID : 3551616
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
comedian	self-employed	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Josephine C. Conlon		Date of Receipt
Mailing Address 1026 S. Knight Ave		<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code
Park Ridge	IL	60068
FEC ID number of contributing federal political committee.		Transaction ID : 3562803
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1500.00"/>
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Valerie Conn		Date of Receipt
Mailing Address 1865 N. Dayton Street Unit A		<input type="text" value="01"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
Chicago	IL	60614
FEC ID number of contributing federal political committee.		Transaction ID : 3554815
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
Fundraiser	University of Chicago	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="2750.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

**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 51 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Willard Thomas Cook		Date of Receipt M M / D D / Y Y Y Y Y 01 / 19 / 2013 Transaction ID : 3560727
Mailing Address 7869 Estrella Court		Amount of Each Receipt this Period 250.00
City Sarasota	State FL	Zip Code 34238
FEC ID number of contributing federal political committee. C	Name of Employer Retired	Occupation N/A
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Hope A. Copeland		Date of Receipt M M / D D / Y Y Y Y Y 01 / 23 / 2013 Transaction ID : 3565345
Mailing Address 540 Alta Ave.		Amount of Each Receipt this Period 1500.00
City Santa Monica	State CA	Zip Code 90402
FEC ID number of contributing federal political committee. C	Name of Employer Real Estate Broker	Occupation Hope Copeland Real Estate
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. Ms. Eleanor Coppola		Date of Receipt M M / D D / Y Y Y Y Y 01 / 28 / 2013 Transaction ID : 3566918
Mailing Address PO Box 321		Amount of Each Receipt this Period 1000.00
City Rutherford	State CA	Zip Code 94573
FEC ID number of contributing federal political committee. C	Name of Employer Owner	Occupation Francis Coppola Presents
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	2750.00
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 52 OF 578
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Irene Correia
Full Name (Last, First, Middle Initial)

Mailing Address 200 Country Club Drive

City Grosse Pointe Farms State MI Zip Code 48235

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

Name of Employer Executive Occupation Vnet

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3559275

Amount of Each Receipt this Period
 250.00

B. Ms. Jamir R. Couch , Esq.
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 6585

City New York State NY Zip Code 10150

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

Name of Employer Consultant/Attorney Occupation Self-employed

Receipt For:
 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
 01 / 07 / 2013
Transaction ID : 3553247

Amount of Each Receipt this Period
 750.00

C. Ms. Connie Cox Price
Full Name (Last, First, Middle Initial)

Mailing Address 2999 Pacific Avenue

City San Francisco State CA Zip Code 94115

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 ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 23 / 2013
Transaction ID : 3565168

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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 53 OF 578
(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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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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Elizabeth Craven		Date of Receipt
Mailing Address 4112 Powder Mill Rd.		<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code
Chapel Hill	NC	27514
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3563100
Name of Employer	Occupation	Amount of Each Receipt this Period
Non-profit Administration	D. Michael Warner - Elizabeth B. Crave	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Geraldine Cristol		Date of Receipt
Mailing Address 3840 Centenary Ave.		<input type="text" value="01"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City	State	Zip Code
Dallas	TX	75225
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3565340
Name of Employer	Occupation	Amount of Each Receipt this Period
Archivist	Temple Emanu-el	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jim Crouse		Date of Receipt
Mailing Address 2001 N Beauregard, Suite 420		<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code
Alexandria	VA	22311
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3550321
Name of Employer	Occupation	Amount of Each Receipt this Period
consultant	Mack Crouse Group	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2500.00"/>
TOTAL 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: (check only one)	PAGE 54 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kaye Crown		Date of Receipt
Mailing Address 112 N. 2nd St., Apt 3B		M M M / D D D / Y Y Y Y Y Y 01 / 17 / 2013
City Philadelphia	State PA	Zip Code 19106
FEC ID number of contributing federal political committee. C		Transaction ID : 3558260
Name of Employer retired educator		Amount of Each Receipt this Period
Occupation none		250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		250.00

Full Name (Last, First, Middle Initial) B. Ms. Beverly B. Cunningham		Date of Receipt
Mailing Address 60 Balsam Dr Apt. 217		M M M / D D D / Y Y Y Y Y Y 01 / 17 / 2013
City Hallowell	State ME	Zip Code 4347
FEC ID number of contributing federal political committee. C		Transaction ID : 3558042
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation none		500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		500.00

Full Name (Last, First, Middle Initial) C. Ms. Karen Cutright		Date of Receipt
Mailing Address 28 Clubside Dr.		M M M / D D D / Y Y Y Y Y Y 01 / 22 / 2013
City Asheville	State NC	Zip Code 28804
FEC ID number of contributing federal political committee. C		Transaction ID : 3563600
Name of Employer RETIRED		Amount of Each Receipt this Period
Occupation none		300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
		300.00

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
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 55 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Dorothy R. Daly		Date of Receipt
Mailing Address 18 Bluestem		<input type="text" value="01"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City	State	Zip Code
Scottsbluff	NE	69361
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	Transaction ID : 3565626
Requested	Requested	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Ellen Daniell		Date of Receipt
Mailing Address 6208 Chelton Drive		<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City	State	Zip Code
Oakland	CA	94611
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	Transaction ID : 3564189
writer	self	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	<input type="text" value="300.00"/>

Full Name (Last, First, Middle Initial) C. Lynn Dantzker		Date of Receipt
Mailing Address 7859 La Quinta Ct.		<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code
Pleasanton	CA	94588
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	Transaction ID : 3563595
Local Government Con	Management Partners, Inc.	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="800.00"/>
TOTAL 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 56 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Katy A. Davenport
 Full Name (Last, First, Middle Initial)
 Mailing Address 23452 Highway 31
 City Metaline Falls State WA Zip Code 99153
 Date of Receipt 01 / 30 / 2013
Transaction ID : 3569549
 Amount of Each Receipt this Period 250.00
 Aggregate Year-to-Date 250.00
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) Other (specify) ▼

B. Ms. Anne R. Davenport
 Full Name (Last, First, Middle Initial)
 Mailing Address 6123 Orange Plaza
 City Panama City Beach State FL Zip Code 32408
 Date of Receipt 01 / 23 / 2013
Transaction ID : 3563989
 Amount of Each Receipt this Period 1000.00
 Aggregate Year-to-Date 1000.00
 Name of Employer PHYSICIST Occupation Naval Surface Warfare Center
 Receipt For: Primary General Other (specify) ▼

C. Barbara Davey
 Full Name (Last, First, Middle Initial)
 Mailing Address 3628 Locke Lane
 City Housyon State TX Zip Code 77027
 Date of Receipt 01 / 03 / 2013
Transaction ID : 3550323
 Amount of Each Receipt this Period 250.00
 Aggregate Year-to-Date 250.00
 Name of Employer student Occupation none
 Receipt For: Primary General Other (specify) ▼

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: (check only one)	PAGE 57 OF 578
	<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)
EMILY's List

A. Robert Davey
Full Name (Last, First, Middle Initial)

Mailing Address 3628 Locke Lane

City Houston State TX Zip Code 77027

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

Name of Employer executive Occupation Vynckier Enclosure Systems, Inc.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 03 / 2013
Transaction ID : 3550322

Amount of Each Receipt this Period 250.00

B. Ms. Debby Davidson
Full Name (Last, First, Middle Initial)

Mailing Address 260 E. Brown Street Suite 320

City Birmingham State MI Zip Code 48009

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

Name of Employer n/a Occupation n/a

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 05 / 2013
Transaction ID : 3551716

Amount of Each Receipt this Period 1000.00

C. Ms. Barbara Davis
Full Name (Last, First, Middle Initial)

Mailing Address 136 Sunbury Rd.

City Slippery Rock State PA Zip Code 16057

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

Name of Employer RETIRED Occupation none

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 29 / 2013
Transaction ID : 3568771

Amount of Each Receipt this Period 250.00

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 58 OF 578
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Shirley Ross Davis		Date of Receipt MM / DD / YYYY 01 / 05 / 2013 Transaction ID : 3551485
Mailing Address 2550 Filbert St		Amount of Each Receipt this Period 1000.00
City San Francisco	State CA	Zip Code 94123
FEC ID number of contributing federal political committee. C	Name of Employer retired	Occupation retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Mr. Rich Davis		Date of Receipt MM / DD / YYYY 01 / 02 / 2013 Transaction ID : 3550031
Mailing Address 1 West Mason Avenue Suite 300		Amount of Each Receipt this Period 5000.00
City Alexandria	State VA	Zip Code 22301
FEC ID number of contributing federal political committee. C	Name of Employer Media Consultant	Occupation Dixon/Davis Media Group
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Ms. Alice T. Day		Date of Receipt MM / DD / YYYY 01 / 01 / 2013 Transaction ID : 3548746
Mailing Address 2124 Newport Place, N.W.		Amount of Each Receipt this Period 250.00
City Washington	State DC	Zip Code 20037
FEC ID number of contributing federal political committee. C	Name of Employer filmmaker/sociologist	Occupation self
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	6250.00
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 59 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. John DeGozzaldi
 Full Name (Last, First, Middle Initial)
 Mailing Address 45 Bigelow St Apt 2
 City Fall River State MA Zip Code 2720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SCIENTIST Occupation US Navy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 23 / 2013
Transaction ID : 3564520
 Amount of Each Receipt this Period
 300.00

B. Ms. Cornelia Dekker
 Full Name (Last, First, Middle Initial)
 Mailing Address 6140 Buena Vista Ave.
 City Oakland State CA Zip Code 94618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pediatrician Occupation Stanford University School of Medicine
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 25 / 2013
Transaction ID : 3566015
 Amount of Each Receipt this Period
 500.00

C. Ms. Susan V. Demers
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 5648
 City St. Thomas State VI Zip Code 803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Attorney Occupation Price Demers & Co.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 02 / 2013
Transaction ID : 3550073
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00
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 60 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Naomi Dempsey		Date of Receipt MM / DD / YYYY 01 / 03 / 2013 Transaction ID : 3550480
Mailing Address 246 Tamerlaine Dr.		Amount of Each Receipt this Period 250.00
City Houston	State TX	Zip Code 77024
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Dr. Janet L. Denlinger		Date of Receipt MM / DD / YYYY 01 / 28 / 2013 Transaction ID : 3568427
Mailing Address 1040 Arcadian Way		Amount of Each Receipt this Period 100.00
City Fort Lee	State NJ	Zip Code 7024
FEC ID number of contributing federal political committee. C		
Name of Employer President	Occupation Matrix Biology Institute	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Dr. Janet L. Denlinger		Date of Receipt MM / DD / YYYY 01 / 24 / 2013 Transaction ID : 3565338
Mailing Address 1040 Arcadian Way		Amount of Each Receipt this Period 500.00
City Fort Lee	State NJ	Zip Code 7024
FEC ID number of contributing federal political committee. C		
Name of Employer President	Occupation Matrix Biology Institute	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

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 61 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Florence DeRose
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 482
 City Leeds State MA Zip Code 1053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3568117
 Amount of Each Receipt this Period
 250.00

B. Alka Dhillon
 Full Name (Last, First, Middle Initial)
 Mailing Address 2759 Manhattan Place
 City Vienna State VA Zip Code 22180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554221
 Amount of Each Receipt this Period
 500.00

C. Ms. Linda R. Dietel
 Full Name (Last, First, Middle Initial)
 Mailing Address Po Box 309
 City Flint Hill State VA Zip Code 22627
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : 3550278
 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: (check only one)	PAGE 62 OF 578
	<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)
EMILY's List

A. Ms. Linda R. Dietel
Full Name (Last, First, Middle Initial)

Mailing Address Po Box 309

City Flint Hill State VA Zip Code 22627

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
01 / 15 / 2013

Transaction ID : 3556588

Amount of Each Receipt this Period
250.00

B. Ms. Sally Dieterich
Full Name (Last, First, Middle Initial)

Mailing Address 720 S 10th St

City Laramie State WY Zip Code 82070

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
01 / 18 / 2013

Transaction ID : 3570003

Amount of Each Receipt this Period
500.00

C. Ms. Mary E. Dimperio
Full Name (Last, First, Middle Initial)

Mailing Address 4000 Cathedral Ave NW Apt 106b

City Washington State DC Zip Code 20016

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

Name of Employer RETIRED Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
01 / 18 / 2013

Transaction ID : 3570269

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
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 63 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Linda Dishy
 Full Name (Last, First, Middle Initial)
 Mailing Address 411 Walnut Street #8391
 City Green Cove Springs State FL Zip Code 32043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired family therapist Occupation Self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 25 / 2013
Transaction ID : 3566479
 Amount of Each Receipt this Period
 250.00

B. Mr. Mark Dodel
 Full Name (Last, First, Middle Initial)
 Mailing Address 584 Hickory Valley Rd.
 City Stroudsburg State PA Zip Code 18360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3567373
 Amount of Each Receipt this Period
 250.00

C. Mr. Henry C. Doll
 Full Name (Last, First, Middle Initial)
 Mailing Address 3159 Van Aken Blvd.
 City Cleveland State OH Zip Code 44120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Minister Occupation East Side Presbyterian Church
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3563059
 Amount of Each Receipt this Period
 225.00

SUBTOTAL of Receipts This Page (optional).....▶	725.00
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 64 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Carol Donovan

Mailing Address 6333 E. Mockingbird Lane
Suite 147, Box 800

City Dallas State TX Zip Code 75214

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

Name of Employer Attorney-Mediator Occupation CarolCDonovanPC@aol.com

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 12 / 2013
Transaction ID : 3554992

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Ms. Carol Dorsey

Mailing Address 108 Eastwind Dr

City Oxford State MS Zip Code 38655

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

Name of Employer artist Occupation self

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 23 / 2013
Transaction ID : 3563778

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Ms. Christine Doyle

Mailing Address 1430 Tartan Trail Rd.

City Hillsborough State CA Zip Code 94010

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

Name of Employer retired Occupation none

Receipt For:
 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
01 / 02 / 2013
Transaction ID : 3550088

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

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 65 OF 578
	<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)
EMILY's List

A. Mr. Richard Drake
Full Name (Last, First, Middle Initial)

Mailing Address 13286 Ovitt Road

City Perrysburg State OH Zip Code 43551

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

Name of Employer MD Occupation Consulting Pathologist Corporation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 25 / 2013
Transaction ID : 3566172

Amount of Each Receipt this Period 250.00

B. Ms. Lucinda Nash Dudley
Full Name (Last, First, Middle Initial)

Mailing Address 10 Bray Wood RD

City Williamsburg State VA Zip Code 23185

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 31 / 2013
Transaction ID : 3570445

Amount of Each Receipt this Period 500.00

C. Ms. Anita B. Dunn
Full Name (Last, First, Middle Initial)

Mailing Address 4413 Stanford St.

City Chevy Chase State MD Zip Code 20815

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

Name of Employer Consultant Occupation Squier Knapp Dunn

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 23 / 2013
Transaction ID : 3563976

Amount of Each Receipt this Period 5000.00

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: (check only one)	PAGE 66 OF 578
	<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)
EMILY's List

A. Ms. Sarah Hawley Dunning
Full Name (Last, First, Middle Initial)

Mailing Address 9239 hathaway

City Dallas State TX Zip Code 75220

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

Name of Employer interior designer Occupation self employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 05 / 2013
Transaction ID : 3551192

Amount of Each Receipt this Period 1000.00

B. Mr. Richard L. Duroe
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 128

City Jeffers State MN Zip Code 56145

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 23 / 2013
Transaction ID : 3564521

Amount of Each Receipt this Period 250.00

C. Ms. Nancy Eales
Full Name (Last, First, Middle Initial)

Mailing Address 402 Dutton Mill RD

City Malvern State PA Zip Code 19355

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

Name of Employer Retired, editorial work Occupation Retired, editorial work

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 20 / 2013
Transaction ID : 3561678

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

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 67 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Patricia E. Eames
 Full Name (Last, First, Middle Initial)
 Mailing Address 3300 Darby RD Apt 5313
 City Haverford State PA Zip Code 19041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 14 / 2013
Transaction ID : 3556497
 Amount of Each Receipt this Period
 250.00

B. Mr. Martin W. Early
 Full Name (Last, First, Middle Initial)
 Mailing Address 407 Villa Circle
 City Thousand Oaks State CA Zip Code 91360
 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 ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 06 / 2013
Transaction ID : 3552083
 Amount of Each Receipt this Period
 250.00

C. Dr. Olga M. Eaton
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 Sandia Road N.W.
 City Albuquerque State NM Zip Code 87107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation University of New Mexico
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 15 / 2013
Transaction ID : 3556142
 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 68 OF 578
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Marilee Eaves
Full Name (Last, First, Middle Initial)
Mailing Address 1612 37th Ave

City Seattle	State WA	Zip Code 98122
-----------------	-------------	-------------------

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

Name of Employer Social Worker	Occupation Retired
-----------------------------------	-----------------------

Receipt For:
 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
01	/	30	/	2013

Transaction ID : 3569799

Amount of Each Receipt this Period
100.00

B. Ms. Marilee Eaves
Full Name (Last, First, Middle Initial)
Mailing Address 1612 37th Ave

City Seattle	State WA	Zip Code 98122
-----------------	-------------	-------------------

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

Name of Employer Social Worker	Occupation Retired
-----------------------------------	-----------------------

Receipt For:
 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
01	/	18	/	2013

Transaction ID : 3560136

Amount of Each Receipt this Period
250.00

C. Dennis Eck
Full Name (Last, First, Middle Initial)
Mailing Address 2877 Paradise Rd #1802

City Las Vegas	State NV	Zip Code 89109
-------------------	-------------	-------------------

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

Name of Employer Investor and Director Retail	Occupation Non Executive Chairman of the Board UI
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	25	/	2013

Transaction ID : 3566151

Amount of Each Receipt this Period
2000.00

Transfer \$2,00 to NF 2/11/13

SUBTOTAL of Receipts This Page (optional).....	2350.00
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 69 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dennis Eck		Date of Receipt
Mailing Address 2877 Paradise Rd #1802		<input type="text" value="01"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
Las Vegas	NV	89109
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3551150
Name of Employer	Occupation	Amount of Each Receipt this Period
Investor and Director Retail	Non Executive Chairman of the Board UI	<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Sally M. Ehlers		Date of Receipt
Mailing Address 720 Bachelor Ave.		<input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City	State	Zip Code
Saint Paul	MN	55118
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3562267
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Joyce Ellis		Date of Receipt
Mailing Address 714 23rd Street		<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code
Glenwood Springs	CO	81601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3562828
Name of Employer	Occupation	Amount of Each Receipt this Period
Physician	retired	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="5550.00"/>
TOTAL 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: (check only one)	PAGE 70 OF 578
	<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)
EMILY's List

A. Ms. Molly Ellsworth
Full Name (Last, First, Middle Initial)
Mailing Address 416 S Saint Asaph Street
City Alexandria State VA Zip Code 22314
FEC ID number of contributing federal political committee. **C**
Name of Employer Social Worker Occupation Self Employed
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 01 / 18 / 2013
Transaction ID : 3569994
Amount of Each Receipt this Period 1000.00

B. Ms. Patricia S. Elvebak
Full Name (Last, First, Middle Initial)
Mailing Address 650 Oakdale Ave.
City Corte Madera State CA Zip Code 94925
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation none
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 01 / 28 / 2013
Transaction ID : 3566909
Amount of Each Receipt this Period 250.00

C. Ms. Gayle Embrey
Full Name (Last, First, Middle Initial)
Mailing Address 416 River Bank Ln.
City Glenwood Springs State CO Zip Code 81601
FEC ID number of contributing federal political committee. **C**
Name of Employer commercial real estate Occupation Embrey Interests Ltd
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 01 / 13 / 2013
Transaction ID : 3555117
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 71 OF 578
	(check only one)
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Lucinda B. Emmet		Date of Receipt
Mailing Address 1020 Southard St		<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City State Zip Code Key West FL 33040		Transaction ID : 3565343
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer Retired	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Arden Epstein		Date of Receipt
Mailing Address 7 S Eight St		<input type="text" value="01"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City State Zip Code South Orange NJ 7079		Transaction ID : 3551775
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer NA	Occupation NA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. Chris Esposito		Date of Receipt
Mailing Address 43 L Street		<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City State Zip Code Lake Lotawana MO 64086		Transaction ID : 3550333
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer Consultant	Occupation Dover Strategy Group	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2250.00"/>
TOTAL 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: (check only one)	PAGE 72 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sandra Estes		Date of Receipt
Mailing Address 5315 South Dentwood Drive		<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	Zip Code
Dallas	TX	75220
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3569200
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Joan S. Faber		Date of Receipt
Mailing Address 300 Central Park West, Apt 4f		<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	Zip Code
New York	NY	10024
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3569194
Name of Employer	Occupation	Amount of Each Receipt this Period
Retired	NA	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. Sylvie Falk		Date of Receipt
Mailing Address 754 Avon Fields Lane		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
Cincinnati	OH	45229
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3563622
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="209.01"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="209.01"/>	[MEMO ITEM] 3 Shs Procter & Gamble

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="600.00"/>
TOTAL 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 73 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Lynn R. Faris

Mailing Address 1417 San Antonio Av

City Alameda State CA Zip Code 94501

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

Name of Employer Retired attorney Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 16 / 2013
Transaction ID : 3557831

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Ms. Tawna Farmer

Mailing Address 36 Old Landing Rd

City Tiburon State CA Zip Code 94920

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

Name of Employer retired Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554214

Amount of Each Receipt this Period
2000.00

Full Name (Last, First, Middle Initial)
C. Ms. Rhonda Farrar

Mailing Address 3435 Via Loma Vista

City Escondido State CA Zip Code 92029

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

Name of Employer Wealth Management Occupation Farrar Financials

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 09 / 2013
Transaction ID : 3554660

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00

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

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

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

FOR LINE NUMBER: PAGE 74 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. Frank B. Feigert

Mailing Address 500 Ct Square, #404

City State Zip Code
Charlottesville VA 22902

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

Name of Employer Occupation
retired retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 05 / 2013
Transaction ID : 3550626

Amount of Each Receipt this Period
250.00

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

Mailing Address 750 Rosewood Drive

City State Zip Code
Palo Alto CA 94303

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

Name of Employer Occupation
physician Stanford University

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 21 / 2013
Transaction ID : 3561994

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Ms. Nancy G. Feldman

Mailing Address 3431 E 67 St.

City State Zip Code
Tulsa OK 74136

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

Name of Employer Occupation
Retired professor Univ. of Tulsa

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 26 / 2013
Transaction ID : 3566497

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: (check only one)	PAGE 75 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Norborn M. Felton		Date of Receipt
Mailing Address PO Box 4613		<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code
Quartzsite	AZ	85359
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	Transaction ID : 3562818
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Joan M. Ferrante		Date of Receipt
Mailing Address 440 Riverside Drive		<input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
New York	NY	10027
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	Transaction ID : 3560368
retired professor	Columbia University	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Adrienne Fields		Date of Receipt
Mailing Address 3900b Watson PI NW, Apt 1d		<input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
Washington	DC	20016
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	Transaction ID : 3556462
RETIRED	N/A	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	<input type="text" value="300.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1550.00"/>
TOTAL 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 76 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Heidi Fields
 Full Name (Last, First, Middle Initial)
 Mailing Address 68 Woodward Ave.
 City Asheville State NC Zip Code 28804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired RN Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3559065
 Amount of Each Receipt this Period
 350.00

B. Dr. Ruth L. Fischbach
 Full Name (Last, First, Middle Initial)
 Mailing Address 3220 Arlington Ave Apt. 11B
 City Bronx State NY Zip Code 10463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Professor Occupation Harvard Medical School
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 14 / 2013
Transaction ID : 3556509
 Amount of Each Receipt this Period
 275.00

C. Mrs. Julia E. Fishelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1630 Burbank RD
 City Wooster State OH Zip Code 44691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 20 / 2013
Transaction ID : 3561787
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1625.00
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 77 OF 578
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Fiske		Date of Receipt
Mailing Address 8 Princeton Ave.		<input type="text" value="01"/> / <input type="text" value="09"/> / <input type="text" value="2013"/>
City Princeton	State NJ	Zip Code 8540
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 3555415
Name of Employer professor		Occupation Princeton University
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="75.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="575.00"/>		

Full Name (Last, First, Middle Initial) B. Ms. Susan Fiske		Date of Receipt
Mailing Address 8 Princeton Ave.		<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City Princeton	State NJ	Zip Code 8540
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 3570543
Name of Employer professor		Occupation Princeton University
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="575.00"/>		

Full Name (Last, First, Middle Initial) C. Peg Fitzpatrick		Date of Receipt
Mailing Address 20 East Main Street		<input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2013"/>
City Lansdale	State PA	Zip Code 19446
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 3550044
Name of Employer marketing		Occupation pmg,inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1075.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 78 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Lauri J. Fitz-Pegado
 Full Name (Last, First, Middle Initial)
 Mailing Address 3401 38TH St NW Apt 309
 City Washington State DC Zip Code 20016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer consultant Occupation The Livingston Group
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 02 / 2013
Transaction ID : 3550093
 Amount of Each Receipt this Period
 500.00

B. Ms. Barbara G. Fleischman
 Full Name (Last, First, Middle Initial)
 Mailing Address 870 United Nations Plaza
 City New York State NY Zip Code 10017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3563596
 Amount of Each Receipt this Period
 300.00

C. Ms. Mary Anne Flournoy
 Full Name (Last, First, Middle Initial)
 Mailing Address 6675 Baker Rd.
 City Athens State OH Zip Code 45701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 16 / 2013
Transaction ID : 3558033
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1800.00
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 79 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Mary Anne Flournoy
 Full Name (Last, First, Middle Initial)
 Mailing Address 6675 Baker Rd.
 City Athens State OH Zip Code 45701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 19 / 2013
Transaction ID : 3560792
 Amount of Each Receipt this Period
 1000.00

B. Ms. Molly F. Foerster
 Full Name (Last, First, Middle Initial)
 Mailing Address 1748 NW Farewell Dr.
 City Bend State OR Zip Code 97701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Na
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3560105
 Amount of Each Receipt this Period
 250.00

C. Dr. Johanna Mendelson Forman
 Full Name (Last, First, Middle Initial)
 Mailing Address 5344 Falmouth Rd
 City Bethesda State MD Zip Code 20816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Attorney Occupation American University
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554211
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
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 80 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Twila L. Foster

Mailing Address 40 Yorkshire Drive

City State Zip Code
Oakland CA 94618

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

Name of Employer Occupation
ATTORNEY Self

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3566922

Amount of Each Receipt this Period
250.00

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

Mailing Address 1011 Cass Street

City State Zip Code
Port Townsend WA 98368

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

Name of Employer Occupation
retired not applicable

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 30 / 2013
Transaction ID : 3569666

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Mrs. Lynda K Fox

Mailing Address 19630 Juna Ln

City State Zip Code
Saratoga CA 95070

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

Name of Employer Occupation
retired retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 05 / 2013
Transaction ID : 3550610

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: (check only one)	PAGE 81 OF 578
	<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)
EMILY's List

A. Dr. Joyce Friedman
Full Name (Last, First, Middle Initial)
Mailing Address 221 Mount Auburn St Apt 304
City Cambridge State MA Zip Code 2138
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation n/a
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **5000.00**

Date of Receipt **01 / 18 / 2013**
Transaction ID : 3558539
Amount of Each Receipt this Period **2500.00**
Transfer \$500 to NF 2/11/13

B. Dr. Joyce Friedman
Full Name (Last, First, Middle Initial)
Mailing Address 221 Mount Auburn St Apt 304
City Cambridge State MA Zip Code 2138
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation n/a
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **5000.00**

Date of Receipt **01 / 16 / 2013**
Transaction ID : 3556765
Amount of Each Receipt this Period **3000.00**

C. Ms. Jane Friehting
Full Name (Last, First, Middle Initial)
Mailing Address 3399 W School House Ln.
City Philadelphia State PA Zip Code 19129
FEC ID number of contributing federal political committee. **C**
Name of Employer PHYSICIAN Occupation South Jersey Gastro
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt **01 / 25 / 2013**
Transaction ID : 3566357
Amount of Each Receipt this Period **300.00**

SUBTOTAL of Receipts This Page (optional)..... **5800.00**
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 82 OF 578
	<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)
EMILY's List

A. Ms. Gloria Frost
Full Name (Last, First, Middle Initial)
Mailing Address 4022 Blue Jay Drive NE

City Cedar Rapids	State IA	Zip Code 52402
----------------------	-------------	-------------------

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

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		29		2013

Transaction ID : 3568493

Amount of Each Receipt this Period
250.00

B. Ms. Nancy Fuller
Full Name (Last, First, Middle Initial)
Mailing Address 6560 Itchy Acres RD

City Granite Bay	State CA	Zip Code 95746
---------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation none
-----------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		09		2013

Transaction ID : 3554531

Amount of Each Receipt this Period
1000.00

C. Ms. Deborah J. Fulton
Full Name (Last, First, Middle Initial)
Mailing Address 1030 Snake Hill RD

City Morgantown	State WV	Zip Code 26508
--------------------	-------------	-------------------

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 ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		08		2013

Transaction ID : 3554111

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
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 83 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Jennifer Gaden

Mailing Address 3400 Rodman Dr.

City State Zip Code
Charlottesville VA 22901

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

Name of Employer Occupation
outreach educator Va Museum of Natural History

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 25 / 2013
Transaction ID : 3566496

Amount of Each Receipt this Period
250.00

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

Mailing Address 6009 W. Colgate Avenue

City State Zip Code
Los Angeles CA 90036

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

Name of Employer Occupation
Musician (retired) none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 05 / 2013
Transaction ID : 3550575

Amount of Each Receipt this Period
200.00

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

Mailing Address 6009 W. Colgate Avenue

City State Zip Code
Los Angeles CA 90036

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

Name of Employer Occupation
Musician (retired) none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2013
Transaction ID : 3568825

Amount of Each Receipt this Period
250.00

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: (check only one)	PAGE 84 OF 578
	<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)
EMILY's List

A. Ms. Judith A. Galperson
Full Name (Last, First, Middle Initial)
Mailing Address 2743 S Beverly DR

City Los Angeles	State CA	Zip Code 90034
---------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation none
-----------------------------	--------------------

Receipt For:
 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
01	/	03	/	2013

Transaction ID : 3550345

Amount of Each Receipt this Period
100.00

B. Ms. Judith A. Galperson
Full Name (Last, First, Middle Initial)
Mailing Address 2743 S Beverly DR

City Los Angeles	State CA	Zip Code 90034
---------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation none
-----------------------------	--------------------

Receipt For:
 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
01	/	23	/	2013

Transaction ID : 3564518

Amount of Each Receipt this Period
200.00

C. Ms. Jan E. Gardner
Full Name (Last, First, Middle Initial)
Mailing Address 3 Ponderosa Ln

City Rolling Hills Estates	State CA	Zip Code 90274
-------------------------------	-------------	-------------------

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

Name of Employer Retired	Occupation N/A
-----------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2013

Transaction ID : 3562268

Amount of Each Receipt this Period
250.00

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: (check only one)	PAGE 85 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Barbara Garrett		Date of Receipt
Mailing Address 301 Casuarina Concourse		<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City State Zip Code Coral Gables FL 33143		Transaction ID : 3563988
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Rita J. Garvey		Date of Receipt
Mailing Address 1715 Estelle Dr		<input type="text" value="01"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City State Zip Code Clearwater FL 33756		Transaction ID : 3565628
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="300.00"/>
Name of Employer Requested	Occupation Requested	
retired	none	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Holly W. Gauthier		Date of Receipt
Mailing Address 224 Warwick Ave		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City State Zip Code South Orange NJ 7079		Transaction ID : 3558030
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer Requested	Occupation Requested	
FUNDRAISER	Barnabas Health	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1550.00"/>
TOTAL 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 86 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Edward Gavin
 Full Name (Last, First, Middle Initial)
 Mailing Address 3188 Laughead Lane
 City State Zip Code
 Garnet Valley PA 19060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Professional Gavin/Solmonese LLC
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : 3557089
 Amount of Each Receipt this Period
 5000.00

B. Mr. Martin Gellert
 Full Name (Last, First, Middle Initial)
 Mailing Address 4108 Dresden St.
 City State Zip Code
 Kensington MD 20895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Biochemist NIH
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 24 / 2013
Transaction ID : 3565621
 Amount of Each Receipt this Period
 250.00

c. Dr. Beverly J. Gibbs
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 279
 City State Zip Code
 Manchaca TX 78652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 UNIV PROF. ENERTIA University of Texas
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3566911
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5350.00
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 87 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Beverly J. Gibbs			Date of Receipt M M / D D / Y Y Y Y Y 01 / 28 / 2013 Transaction ID : 3567266
Mailing Address PO Box 279			Amount of Each Receipt this Period 125.00
City Manchaca	State TX	Zip Code 78652	
FEC ID number of contributing federal political committee. C			
Name of Employer UNIV PROF. ENERTIA	Occupation University of Texas		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) B. Ms. Elaine Gibson			Date of Receipt M M / D D / Y Y Y Y Y 01 / 06 / 2013 Transaction ID : 3552453
Mailing Address 3768 Brenner Dr.			Amount of Each Receipt this Period 250.00
City Santa Barbara	State CA	Zip Code 93105	
FEC ID number of contributing federal political committee. C			
Name of Employer Teacher	Occupation SBMNH		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Mary Giersch			Date of Receipt M M / D D / Y Y Y Y Y 01 / 05 / 2013 Transaction ID : 3550916
Mailing Address 16050 SW Waxwing Way			Amount of Each Receipt this Period 500.00
City Beaverton	State OR	Zip Code 97007	
FEC ID number of contributing federal political committee. C			
Name of Employer ISA CERTIFIED ARBORIST	Occupation SELF EMPLOYED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional).....▶	875.00
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 88 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Priscilla A Gilman
 Full Name (Last, First, Middle Initial)
 Mailing Address 4537 Deer Run
 City Evans State GA Zip Code 30809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Physician/educator Occupation GHSU
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3561560
 Amount of Each Receipt this Period
 250.00

B. Dr. Priscilla A Gilman
 Full Name (Last, First, Middle Initial)
 Mailing Address 4537 Deer Run
 City Evans State GA Zip Code 30809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Physician/educator Occupation GHSU
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 27 / 2013
Transaction ID : 3568210
 Amount of Each Receipt this Period
 50.00

C. Dr. Priscilla A Gilman
 Full Name (Last, First, Middle Initial)
 Mailing Address 4537 Deer Run
 City Evans State GA Zip Code 30809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Physician/educator Occupation GHSU
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 06 / 2013
Transaction ID : 3552249
 Amount of Each Receipt this Period
 250.00

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: (check only one)	PAGE 89 OF 578
	<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)
EMILY's List

A. Mr. Randall J. Gingiss
Full Name (Last, First, Middle Initial)

Mailing Address 1035 Valley View Drive

City Vermillion State SD Zip Code 57069

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

Name of Employer PROFESSOR OF LAW Occupation University of South Dakota

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3566924

Amount of Each Receipt this Period
 1000.00

B. Ms. Margaret Glasgow
Full Name (Last, First, Middle Initial)

Mailing Address 24 Lawson Way

City Greenville State SC Zip Code 29605

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

Name of Employer retired sociologist Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3559073

Amount of Each Receipt this Period
 250.00

C. Ms. Susan J. Glass
Full Name (Last, First, Middle Initial)

Mailing Address 8 Mirador

City Irvine State CA Zip Code 92612

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

Name of Employer attorney Occupation self

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 30 / 2013
Transaction ID : 3569922

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 90 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Candy Glazer

Mailing Address 68 Knollwood Circle

City State Zip Code
Longmeadow MA 1106

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

Name of Employer Occupation
event coordinator Self Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 09 / 2013
Transaction ID : 3554489

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Ms. Sarah B. Glickenhau

Mailing Address 100 Dorchester RD

City State Zip Code
Scarsdale NY 10583

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

Name of Employer Occupation
RETIRED none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : 3570281

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
c. Dr. C. Globiana

Mailing Address 24 Woodland Street

City State Zip Code
Arlington MA 2476

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

Name of Employer Occupation
retired self

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3558920

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 91 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jane Blumberg Goldberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 Laurel Avenue, Apt 506
 City San Mateo State CA Zip Code 94401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3553985
 Amount of Each Receipt this Period
 250.00

B. Dr. David M Golden
 Full Name (Last, First, Middle Initial)
 Mailing Address 460 El Capitan Pl
 City Palo Alto State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 19 / 2013
Transaction ID : 3561365
 Amount of Each Receipt this Period
 250.00

C. Ms. Frances E. Goldman
 Full Name (Last, First, Middle Initial)
 Mailing Address 3639 Windom PL NW
 City Washington State DC Zip Code 20008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Finance Occupation self-employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3553966
 Amount of Each Receipt this Period
 1150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1650.00
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 92 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dan Goldwasser		Date of Receipt M M / D D / Y Y Y Y Y 01 / 09 / 2013 Transaction ID : 3554529
Mailing Address 192 Regents Park		Amount of Each Receipt this Period 500.00
City Westport	State CT	Zip Code 6880
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Dan Goldwasser		Date of Receipt M M / D D / Y Y Y Y Y 01 / 28 / 2013 Transaction ID : 3568102
Mailing Address 192 Regents Park		Amount of Each Receipt this Period 500.00
City Westport	State CT	Zip Code 6880
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Ms. Frances H. Gonzales		Date of Receipt M M / D D / Y Y Y Y Y 01 / 16 / 2013 Transaction ID : 3556405
Mailing Address 251 Polynesia Court		Amount of Each Receipt this Period 5000.00
City Marco Island	State FL	Zip Code 34145
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
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 93 OF 578
	<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)
EMILY's List

A. Ms. Barbara M. Goodbody
 Full Name (Last, First, Middle Initial)
 Mailing Address 68 Foreside Road
 City Cumberland Foreside State ME Zip Code 4110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NA Occupation NA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 20 / 2013
Transaction ID : 3561603
 Amount of Each Receipt this Period
 500.00

B. Mr. Robert Goodrich
 Full Name (Last, First, Middle Initial)
 Mailing Address 4417 Broadmoor Ave Se
 City Kentwood State MI Zip Code 49512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer President/Secretary Occupation Goodrich Quality Theaters
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 16 / 2013
Transaction ID : 3557419
 Amount of Each Receipt this Period
 250.00

C. Bobette Gorden
 Full Name (Last, First, Middle Initial)
 Mailing Address 2248 S. Forest
 City Tempe State AZ Zip Code 85282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer mrktng Occupation INFLUENCE AT WORK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554401
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional).....▶	950.00
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 94 OF 578
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Bobette Gorden
Full Name (Last, First, Middle Initial)
Mailing Address 2248 S. Forest

City Tempe	State AZ	Zip Code 85282
---------------	-------------	-------------------

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

Name of Employer mrktng	Occupation INFLUENCE AT WORK
----------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	17	/	2013

Transaction ID : 3558406

Amount of Each Receipt this Period
500.00

B. Bobette Gorden
Full Name (Last, First, Middle Initial)
Mailing Address 2248 S. Forest

City Tempe	State AZ	Zip Code 85282
---------------	-------------	-------------------

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

Name of Employer mrktng	Occupation INFLUENCE AT WORK
----------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	24	/	2013

Transaction ID : 3565808

Amount of Each Receipt this Period
500.00

C. JERRY GORDON
Full Name (Last, First, Middle Initial)
Mailing Address 107 FONTAINE COURT

City MONROE TOWNSHIP	State NJ	Zip Code 8831
-------------------------	-------------	------------------

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

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	18	/	2013

Transaction ID : 3574077

Amount of Each Receipt this Period
250.00

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 95 OF 578
	<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)
EMILY's List

A. Tylynn Gordon
Full Name (Last, First, Middle Initial)
Mailing Address 1 West Mason Ave
City Alexandria State VA Zip Code 22301
FEC ID number of contributing federal political committee. **C**
Name of Employer Senior VP Occupation Strategies 360
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 09 / 2013
Transaction ID : 3554623
Amount of Each Receipt this Period
1000.00

B. Ian Goslin
Full Name (Last, First, Middle Initial)
Mailing Address 7221 N. Wescott Ct.
City Peoria State IL Zip Code 61615
FEC ID number of contributing federal political committee. **C**
Name of Employer Manager Occupation Caterpillar Inc.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 24 / 2013
Transaction ID : 3564963
Amount of Each Receipt this Period
100.00

C. Ian Goslin
Full Name (Last, First, Middle Initial)
Mailing Address 7221 N. Wescott Ct.
City Peoria State IL Zip Code 61615
FEC ID number of contributing federal political committee. **C**
Name of Employer Manager Occupation Caterpillar Inc.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 08 / 2013
Transaction ID : 3553914
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
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 96 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. David E. Grambort
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 Edenborough Ln.
 City State Zip Code
 Bella Vista AR 72715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3563586
 Amount of Each Receipt this Period
 250.00

B. Ms. Sarah Grant
 Full Name (Last, First, Middle Initial)
 Mailing Address 208 Lake CT
 City State Zip Code
 Chapel Hill NC 27516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3567415
 Amount of Each Receipt this Period
 250.00

C. Ms. Jo Ann Grant
 Full Name (Last, First, Middle Initial)
 Mailing Address 407 Belvedere St.
 City State Zip Code
 La Jolla CA 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3563609
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
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 97 OF 578
	<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)
EMILY's List

A. Ms. Sandra L. Granzow
Full Name (Last, First, Middle Initial)

Mailing Address 1701 16th St, NW

City Washington State DC Zip Code 20009

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

Name of Employer Self-employed Occupation International Development Professional

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
01 / 08 / 2013
Transaction ID : 3554217

Amount of Each Receipt this Period
1300.00

B. Ms. Carol Green
Full Name (Last, First, Middle Initial)

Mailing Address 14 Craigie St

City Cambridge State MA Zip Code 2138

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
01 / 23 / 2013
Transaction ID : 3564532

Amount of Each Receipt this Period
300.00

C. Dr. Sadjia Greenwood
Full Name (Last, First, Middle Initial)

Mailing Address 440 Birch Rd.
PO Box 221

City Bolinas State CA Zip Code 94924

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

Name of Employer Retired Occupation None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
01 / 10 / 2013
Transaction ID : 3554809

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2100.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 578
<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Phyllis Greer			Date of Receipt												
Mailing Address 210 E Melbourne Ave			<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>06</td> <td></td> <td>2013</td> </tr> </table>			M M	/	D D	/	Y Y Y Y	01		06		2013
M M	/	D D	/	Y Y Y Y											
01		06		2013											
City State Zip Code Silver Spring MD 20901			Transaction ID : 3552262												
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period												
			<table border="1"> <tr> <td colspan="5" style="text-align: right;">10.00</td> </tr> </table>			10.00									
10.00															
Name of Employer tutor		Occupation self													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼													
		<table border="1"> <tr> <td colspan="5" style="text-align: right;">310.00</td> </tr> </table>	310.00												
310.00															

Full Name (Last, First, Middle Initial) B. Ms. Phyllis Greer			Date of Receipt												
Mailing Address 210 E Melbourne Ave			<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>03</td> <td></td> <td>2013</td> </tr> </table>			M M	/	D D	/	Y Y Y Y	01		03		2013
M M	/	D D	/	Y Y Y Y											
01		03		2013											
City State Zip Code Silver Spring MD 20901			Transaction ID : 3550255												
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period												
			<table border="1"> <tr> <td colspan="5" style="text-align: right;">300.00</td> </tr> </table>			300.00									
300.00															
Name of Employer tutor		Occupation self													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼													
		<table border="1"> <tr> <td colspan="5" style="text-align: right;">310.00</td> </tr> </table>	310.00												
310.00															

Full Name (Last, First, Middle Initial) C. Betsy Gressler			Date of Receipt												
Mailing Address 1230 Dale Drive			<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>03</td> <td></td> <td>2013</td> </tr> </table>			M M	/	D D	/	Y Y Y Y	01		03		2013
M M	/	D D	/	Y Y Y Y											
01		03		2013											
City State Zip Code Silver Spring MD 20910			Transaction ID : 3550332												
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period												
			<table border="1"> <tr> <td colspan="5" style="text-align: right;">2500.00</td> </tr> </table>			2500.00									
2500.00															
Name of Employer Director		Occupation Blackbaud													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼													
		<table border="1"> <tr> <td colspan="5" style="text-align: right;">2500.00</td> </tr> </table>	2500.00												
2500.00															

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"> <tr> <td colspan="5" style="text-align: right;">2810.00</td> </tr> </table>	2810.00				
2810.00						
TOTAL This Period (last page this line number only).....▶	<table border="1"> <tr> <td colspan="5" style="text-align: right;"> </td> </tr> </table>					

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

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

FOR LINE NUMBER: PAGE 99 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Susan Griffith

Mailing Address 950 Westbank DR Ste 100

City State Zip Code
West Lake Hills TX 78746

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

Name of Employer Occupation
REALTOR Amelia Bullock

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3570271

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. Ms. Melinda Griffith

Mailing Address 1977 Gaspar Drive

City State Zip Code
Oakland CA 94611

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

Name of Employer Occupation
Business Development General Electric

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3568547

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Ms. Mary Ann Grilli

Mailing Address 328 Oxford Ave.

City State Zip Code
Palo Alto CA 94306

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

Name of Employer Occupation
Judge Santa Clara County

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 23 / 2013
Transaction ID : 3564533

Amount of Each Receipt this Period
300.00

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 100 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Kim Grimes
 Full Name (Last, First, Middle Initial)
 Mailing Address 45 Island View Drive
 City Newport News State VA Zip Code 23602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 14 / 2013
Transaction ID : 3555427
 Amount of Each Receipt this Period
 500.00

B. Ms. Irene Groban
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 DOGWOOD LANE
 City Hartsdale State NY Zip Code 10530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SOCIAL WORKER Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 07 / 2013
Transaction ID : 3554207
 Amount of Each Receipt this Period
 300.00

C. Ms. Irene Groban
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 DOGWOOD LANE
 City Hartsdale State NY Zip Code 10530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SOCIAL WORKER Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3568158
 Amount of Each Receipt this Period
 300.00

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: PAGE 101 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Janet Gross

Mailing Address 2804 W Gordon St

City State Zip Code
Allentown PA 18104

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

Name of Employer Occupation
Consultant Self Employed

Receipt For:
 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
 01 / 15 / 2013
Transaction ID : 3556743

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. Ms. Mandy Grunwald

Mailing Address 1306 30th St. NW

City State Zip Code
Washington DC 20007

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

Name of Employer Occupation
Political consultant Grunwald Communications

Receipt For:
 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
 01 / 19 / 2013
Transaction ID : 3560507

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Ms. Lisa A. Guide

Mailing Address 8419 W Boulevard Dr

City State Zip Code
Alexandria VA 22308

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

Name of Employer Occupation
non profit Rockefeller Family Fund

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 11 / 2013
Transaction ID : 3554944

Amount of Each Receipt this Period
100.00

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: (check only one)	PAGE 102 OF 578
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		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Lisa A. Guide
Full Name (Last, First, Middle Initial)
Mailing Address 8419 W Boulevard Dr
City Alexandria State VA Zip Code 22308
FEC ID number of contributing federal political committee. **C**
Name of Employer non profit Occupation Rockefeller Family Fund
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 14 / 2013
Transaction ID : 3555127
Amount of Each Receipt this Period
500.00

B. Ms. Nan Guslander
Full Name (Last, First, Middle Initial)
Mailing Address 5501-A Balcones Dr #175
City Austin State TX Zip Code 78731
FEC ID number of contributing federal political committee. **C**
Name of Employer real estate investor Occupation self
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2013
Transaction ID : 3563850
Amount of Each Receipt this Period
1000.00

C. Ms. Carola Haas
Full Name (Last, First, Middle Initial)
Mailing Address 4462 Sidney Church Road
City Riner State VA Zip Code 24149
FEC ID number of contributing federal political committee. **C**
Name of Employer professor Occupation Virginia Tech
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 01 / 2013
Transaction ID : 3548715
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
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 103 OF 578

(check only one)

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NAME OF COMMITTEE (In Full)

EMILY's List

Full Name (Last, First, Middle Initial)

A. Leah Haber

Mailing Address 518 Quail Hill Court

City Walnut Creek State CA Zip Code 94595

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 24 / 2013

Transaction ID : 3565983

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Jon Haber

Mailing Address 4914 43rd Street, NW

City Washington State DC Zip Code 20016

FEC ID number of contributing federal political committee. C

Name of Employer Consultant Occupation Cascade Strategy, Inc.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 15 / 2013

Transaction ID : 3555749

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Ann Marie Habershaw

Mailing Address P.O. Box 77774

City Washington State DC Zip Code 20013

FEC ID number of contributing federal political committee. C

Name of Employer COO Occupation Obama for America

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 10 / 2013

Transaction ID : 3554806

Amount of Each Receipt this Period

100.00

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

1350.00

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 104 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ann Marie Habershaw
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 77774
 City Washington State DC Zip Code 20013
 Date of Receipt 01 / 03 / 2013
 Transaction ID : 3550259
 Amount of Each Receipt this Period 150.00
 FEC ID number of contributing federal political committee. C
 Name of Employer COO Occupation Obama for America
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

B. Ms. Janet Hadley
 Full Name (Last, First, Middle Initial)
 Mailing Address 96 Archipelago Drive
 City Newport Coast State CA Zip Code 92657
 Date of Receipt 01 / 19 / 2013
 Transaction ID : 3565143
 Amount of Each Receipt this Period 25.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Philanthropist Occupation self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

C. Ms. Janet Hadley
 Full Name (Last, First, Middle Initial)
 Mailing Address 96 Archipelago Drive
 City Newport Coast State CA Zip Code 92657
 Date of Receipt 01 / 03 / 2013
 Transaction ID : 3550382
 Amount of Each Receipt this Period 500.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Philanthropist Occupation self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 675.00
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 105 OF 578
	<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)
EMILY's List

A. Ms. Karen Hafstrom
Full Name (Last, First, Middle Initial)
Mailing Address 555 W Cornelia Ave., Apt. 910

City Chicago	State IL	Zip Code 60657
-----------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation none
-----------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	22	/	2013

Transaction ID : 3563594

Amount of Each Receipt this Period
300.00

B. Mrs. Kristi U. Haigh
Full Name (Last, First, Middle Initial)
Mailing Address 4 Oak Flat Road

City Orinda	State CA	Zip Code 94563
----------------	-------------	-------------------

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

Name of Employer retired	Occupation none
-----------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	15	/	2013

Transaction ID : 3556274

Amount of Each Receipt this Period
1000.00

C. Ms. Gabrielle Halko
Full Name (Last, First, Middle Initial)
Mailing Address 607 E Allens Ln

City Philadelphia	State PA	Zip Code 19119
----------------------	-------------	-------------------

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

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	28	/	2013

Transaction ID : 3567408

Amount of Each Receipt this Period
250.00

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 106 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jeanette M. Hall
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Azalea Avenue
 City State Zip Code
 Fairfax CA 94930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Enrolled Agent Self
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 16 / 2013
Transaction ID : 3557885
 Amount of Each Receipt this Period
 250.00

B. Dr. Thomas L. Hall
 Full Name (Last, First, Middle Initial)
 Mailing Address 1515 16th Ave.
 City State Zip Code
 San Francisco CA 94122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 none none
 Receipt For:
 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
 01 / 23 / 2013
Transaction ID : 3563991
 Amount of Each Receipt this Period
 1000.00

C. Dr. Mary Jane Hamilton
 Full Name (Last, First, Middle Initial)
 Mailing Address 78 Covered Bridge Rd
 City State Zip Code
 Carmichael CA 95608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED none
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 04 / 2013
Transaction ID : 3550314
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1275.00
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 107 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Mary Jane Hamilton
 Full Name (Last, First, Middle Initial)
 Mailing Address 78 Covered Bridge Rd
 City Carmichael State CA Zip Code 95608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554117
 Amount of Each Receipt this Period
 50.00

B. Dr. Mary Jane Hamilton
 Full Name (Last, First, Middle Initial)
 Mailing Address 78 Covered Bridge Rd
 City Carmichael State CA Zip Code 95608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 04 / 2013
Transaction ID : 3550288
 Amount of Each Receipt this Period
 450.00

C. Ms. Wendolyn H. Hamlin-Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 100-H Burnt Brridge Way
 City Yorktown State VA Zip Code 23692
 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 ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 24 / 2013
Transaction ID : 3568196
 Amount of Each Receipt this Period
 100.00

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: (check only one)	PAGE 108 OF 578
	<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)
EMILY's List

A. Ms. Wendolyn H. Hamlin-Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 100-H Burnt Brridge Way
 City Yorktown State VA Zip Code 23692
 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 ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : 3550354
 Amount of Each Receipt this Period
 250.00

B. Ms. Colleen Hanabusa
 Full Name (Last, First, Middle Initial)
 Mailing Address 3660 Waokanaka Street
 City Honolulu State HI Zip Code 96817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Congresswoman Occupation US House
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 19 / 2013
Transaction ID : 3561466
 Amount of Each Receipt this Period
 350.00

C. Dr. Janet R. Hankin
 Full Name (Last, First, Middle Initial)
 Mailing Address 8618 Huntington Road
 City Huntington Woods State MI Zip Code 48070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer sociologist Occupation Wayne State University
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 25 / 2013
Transaction ID : 3566591
 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: (check only one)	PAGE 109 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Kathryn Hanley

Mailing Address 4432 Klinge Street NW

City Washington State DC Zip Code 20016

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

Name of Employer Occupation
Exec Dir The Hanley Foundation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
01 / 14 / 2013
Transaction ID : 3555126

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. John E. Hansan

Mailing Address 6813 Rosemont Drive

City McLean State VA Zip Code 22101

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

Name of Employer Occupation
Social Worker Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
01 / 19 / 2013
Transaction ID : 3560571

Amount of Each Receipt this Period
350.00

Full Name (Last, First, Middle Initial)
C. Ms. Carol Hansen

Mailing Address 822 BRYANT AVE

City Winnetka State IL Zip Code 60093

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
01 / 17 / 2013
Transaction ID : 3559394

Amount of Each Receipt this Period
50.00

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 110 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Carol Hansen
 Full Name (Last, First, Middle Initial)
 Mailing Address 822 BRYANT AVE
 City Winnetka State IL Zip Code 60093
 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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3559393
 Amount of Each Receipt this Period
 250.00

B. Ms. Deborah A. Harding
 Full Name (Last, First, Middle Initial)
 Mailing Address 2500 Q St, NW #233
 City Washington State DC Zip Code 20007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A 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 Y Y
 01 / 15 / 2013
Transaction ID : 3555744
 Amount of Each Receipt this Period
 250.00

C. Ms. Gloria Harley
 Full Name (Last, First, Middle Initial)
 Mailing Address 617 W Lake Cir.
 City Augusta State GA Zip Code 30907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation N/A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3569187
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
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 111 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Eleanor E. Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 564 Westminster Circle
 City Greenville State NC Zip Code 27858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer physician Occupation East Carolina University
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2015.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 06 / 2013
Transaction ID : 3552037
 Amount of Each Receipt this Period
 15.00

B. Dr. Eleanor E. Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 564 Westminster Circle
 City Greenville State NC Zip Code 27858
 FEC ID number of contributing federal political committee. **C**
 Name of Employer physician Occupation East Carolina University
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2015.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554151
 Amount of Each Receipt this Period
 2000.00

C. Ms. Lois Cowles Harrison
 Full Name (Last, First, Middle Initial)
 Mailing Address 2311 Nevada Road
 City Lakeland State FL Zip Code 33803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 16 / 2013
Transaction ID : 3558037
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3015.00
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 112 OF 578
	<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)
EMILY's List

A. Ms. Michalann Harthill
 Full Name (Last, First, Middle Initial)
 Mailing Address 6989 Linganore Road
 City State Zip Code
 Frederick MD 21701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 none none
 Receipt For:
 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
 01 / 11 / 2013
Transaction ID : 3554895
 Amount of Each Receipt this Period
 1000.00

B. Ms. Linda Hartig
 Full Name (Last, First, Middle Initial)
 Mailing Address 180 Otter Rock Dr.
 City State Zip Code
 Greenwich CT 6830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED none
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3562806
 Amount of Each Receipt this Period
 1500.00

C. Mr. Terry G Harvey
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 Old Covered Bridge Road
 City State Zip Code
 Newtown Sq PA 19073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 teacher University of Delaware
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 07 / 2013
Transaction ID : 3553774
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	2750.00
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 113 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Barbara Haskew
 Full Name (Last, First, Middle Initial)
 Mailing Address 1116 Cumberland Road
 City Chattanooga State TN Zip Code 37419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 23 / 2013
Transaction ID : 3564119
 Amount of Each Receipt this Period
 250.00

B. Dr. Lynn E Hauser
 Full Name (Last, First, Middle Initial)
 Mailing Address 950 N Michigan Ave Apt 5403
 City Chicago State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554376
 Amount of Each Receipt this Period
 1500.00

C. Ms. Ezra Hausman
 Full Name (Last, First, Middle Initial)
 Mailing Address 77 Kaposia Street
 City Auburndale State MA Zip Code 2466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Consultant Occupation Synapse Energy Economics
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2013
Transaction ID : 3561584
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
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 114 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Ava Haymon		Date of Receipt
Mailing Address 672 Nelson Dr		<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
Baton Rouge	LA	70808
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Retired	Self	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		
		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>

Full Name (Last, First, Middle Initial) B. Ms. Annette Haynie		Date of Receipt
Mailing Address 111 Hampton Court		<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code
Mandeville	LA	70471
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Realtor	Gardner Realtors	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>

Full Name (Last, First, Middle Initial) C. Ms. Annette Haynie		Date of Receipt
Mailing Address 111 Hampton Court		<input type="text" value="01"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
Mandeville	LA	70471
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Realtor	Gardner Realtors	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		
		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="750.00"/>
TOTAL 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 115 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Joanne Heckman

Mailing Address 11174 Wood Elves Way

City Columbia State MD Zip Code 21044

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

Name of Employer na Occupation na

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 23 / 2013
Transaction ID : 3563727

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Ms. Elizabeth Hedden

Mailing Address 3200 Overton Park Dr. W

City Fort Worth State TX Zip Code 76109

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 25 / 2013
Transaction ID : 3566175

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Ms. Nikki Heidepriem

Mailing Address 5404 Edgemoor Lane

City Bethesda State MD Zip Code 20814

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

Name of Employer partner Occupation Heidepriem & Associates

Receipt For:
 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
 01 / 15 / 2013
Transaction ID : 3555760

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

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 116 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Anne M. Heinz		Date of Receipt
Mailing Address 525 Judson Ave		<input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
Evanston	IL	60202
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3560951
Name of Employer	Occupation	Amount of Each Receipt this Period
Retired	Retired	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Lisa Helling		Date of Receipt
Mailing Address 6 Grove Ridge Ct.		<input type="text" value="01"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
Rockville	MD	20852
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3558933
Name of Employer	Occupation	Amount of Each Receipt this Period
Foreign Service Officer	U.S. State Department	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Janet W. Helman		Date of Receipt
Mailing Address 4950 S Chicago Beach Dr		<input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City	State	Zip Code
Chicago	IL	60615
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3562085
Name of Employer	Occupation	Amount of Each Receipt this Period
retired	none	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1500.00"/>
TOTAL 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 117 OF 578
(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)
EMILY's List

A. Mr. Charles T. Hendrix
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 Dominion Ct.
 City Rancho Mirage State CA Zip Code 92270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Publisher SAGE Publications
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 23 / 2013
Transaction ID : 3565620
 Amount of Each Receipt this Period
 250.00

B. Carl Hensler
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 SMITH ROAD
 City WATSONVILLE State CA Zip Code 95076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired none
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 06 / 2013
Transaction ID : 3552268
 Amount of Each Receipt this Period
 250.00

C. Ms. Paula T. Herd
 Full Name (Last, First, Middle Initial)
 Mailing Address 4662 Rockcliff Rd
 City Austin State TX Zip Code 78746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 none none
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 29 / 2013
Transaction ID : 3569191
 Amount of Each Receipt this Period
 500.00

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: (check only one)	PAGE 118 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Kathryn Herr
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 Massachusetts Ave., NW #50
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Investor Relations Occupation Exelis Inc.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2013
Transaction ID : 3562610
 Amount of Each Receipt this Period
250.00

B. Charniele Herring
 Full Name (Last, First, Middle Initial)
 Mailing Address 715 N. Ashton St
 City Alexandria State VA Zip Code 22312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 10 / 2013
Transaction ID : 3554811
 Amount of Each Receipt this Period
250.00

C. Linda Hesse
 Full Name (Last, First, Middle Initial)
 Mailing Address 901 Lakeside Ave
 City Cleveland State OH Zip Code 44114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Partner Occupation Jones Day
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1255.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 01 / 2013
Transaction ID : 3548791
 Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional)..... **505.00**
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 119 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Linda Hesse
 Full Name (Last, First, Middle Initial)
 Mailing Address 901 Lakeside Ave
 City Cleveland State OH Zip Code 44114
 Date of Receipt 01 / 07 / 2013
Transaction ID : 3553248
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Partner Occupation Jones Day
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1255.00

B. Linda Hesse
 Full Name (Last, First, Middle Initial)
 Mailing Address 901 Lakeside Ave
 City Cleveland State OH Zip Code 44114
 Date of Receipt 01 / 01 / 2013
Transaction ID : 3548747
 Amount of Each Receipt this Period 1000.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Partner Occupation Jones Day
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1255.00

C. Ms. Jutta B. Hicks
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Mt. Vernon St.
 City Boston State MA Zip Code 2108
 Date of Receipt 01 / 11 / 2013
Transaction ID : 3554899
 Amount of Each Receipt this Period 3000.00
 FEC ID number of contributing federal political committee. C
 Name of Employer housewife Occupation n/a
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 4250.00
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 120 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Anne Hill
 Full Name (Last, First, Middle Initial)
 Mailing Address 121 S Hunt Rd
 City Carbondale State IL Zip Code 62902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: retired Occupation: none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 01 / 29 / 2013
Transaction ID : 3569365
 Amount of Each Receipt this Period: 1000.00

B. Mrs. Elizabeth S. Hinchliff
 Full Name (Last, First, Middle Initial)
 Mailing Address 1554 Mayflower Ct
 City Winter Park State FL Zip Code 32792
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: RETIRED Occupation: none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 01 / 21 / 2013
Transaction ID : 3562079
 Amount of Each Receipt this Period: 1000.00

C. Joy Hinton
 Full Name (Last, First, Middle Initial)
 Mailing Address 562 Kelly Way
 City Palo Alto State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Lawyer Occupation: The Alston Roach Group/Axiom Legal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 01 / 23 / 2013
Transaction ID : 3565178
 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 121 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Louise C. Hipsh		Date of Receipt 01 / 28 / 2013 Transaction ID : 3568098
Mailing Address 12809 Cedar St		Amount of Each Receipt this Period 300.00
City Leawood	State KS	
Zip Code 66209		Aggregate Year-to-Date ▼ 300.00
FEC ID number of contributing federal political committee. C		
Name of Employer ATTORNEY	Occupation notsupply.com	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Ms. Emily M Hodges		Date of Receipt 01 / 09 / 2013 Transaction ID : 3554636
Mailing Address 415 Bond Pl Apt 9a		Amount of Each Receipt this Period 350.00
City Cincinnati	State OH	
Zip Code 45206		Aggregate Year-to-Date ▼ 350.00
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation none	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Roni Horn		Date of Receipt 01 / 03 / 2013 Transaction ID : 3550282
Mailing Address 106 7th Ave #3		Amount of Each Receipt this Period 1000.00
City New York	State NY	
Zip Code 10011		Aggregate Year-to-Date ▼ 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer artist	Occupation self	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Receipts This Page (optional).....▶	1650.00
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 122 OF 578
	<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)
EMILY's List

A. Ms. Barbara Hoskins
Full Name (Last, First, Middle Initial)
Mailing Address 5403 Rodgers Avenue
City Harrisburg State PA Zip Code 17112
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation none
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt
01 / 31 / 2013
Transaction ID : 3570283
Amount of Each Receipt this Period
250.00

B. Ms. Marjorie L Hoskinson
Full Name (Last, First, Middle Initial)
Mailing Address 813 Old Farm Rd
City Thousand Oaks State CA Zip Code 91360
FEC ID number of contributing federal political committee. **C**
Name of Employer teacher Occupation Los Angeles Community College istrict
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt
01 / 23 / 2013
Transaction ID : 3565107
Amount of Each Receipt this Period
1000.00

C. Ms. Sylvia Hougland
Full Name (Last, First, Middle Initial)
Mailing Address 5922 Mapleshade Lane
City Dallas State TX Zip Code 75252
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation none
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt
01 / 21 / 2013
Transaction ID : 3562305
Amount of Each Receipt this Period
250.00

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: (check only one)	PAGE 123 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Idelle A Howitt		Date of Receipt MM / DD / YYYY 01 / 08 / 2013 Transaction ID : 3553906
Mailing Address Two Sutton Place South Apt. 7g		Amount of Each Receipt this Period 1000.00
City New York	State NY	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer attorney	Occupation Howitt and Associates	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Frances Huffman		Date of Receipt MM / DD / YYYY 01 / 15 / 2013 Transaction ID : 3556586
Mailing Address 2400 Hoyt St		Amount of Each Receipt this Period 1000.00
City Winston Salem	State NC	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer UNEMPLOYED	Occupation none	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Mary P. Hugues		Date of Receipt MM / DD / YYYY 01 / 04 / 2013 Transaction ID : 3550289
Mailing Address 230 S. 23rd Street		Amount of Each Receipt this Period 1000.00
City Philadelphia	State PA	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer REQUESTED	Occupation Virtua Health, Inc.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 578
	<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)
EMILY's List

A. Ms. Mary Hulett
Full Name (Last, First, Middle Initial)
Mailing Address 373 Wilkinson Creek Ln.
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer mhulett@rl-law.com Occupation ragsdale liggett
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 22 / 2013
Transaction ID : 3562826
Amount of Each Receipt this Period
250.00

B. Kristin Hull
Full Name (Last, First, Middle Initial)
Mailing Address 341 El Cerrito Ave
City Piedmont State CA Zip Code 94611
FEC ID number of contributing federal political committee. **C**
Name of Employer Educator Occupation Nia Community Foundation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 16 / 2013
Transaction ID : 3557861
Amount of Each Receipt this Period
1000.00

C. Ms. Mary Hurtig
Full Name (Last, First, Middle Initial)
Mailing Address 2353 Bryn Mawr Ave
City Philadelphia State PA Zip Code 19131
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 08 / 2013
Transaction ID : 3554143
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 125 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Esther Hutchinson

Mailing Address 3565 Victor St

City State Zip Code
Santa Clara CA 95054

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2013
Transaction ID : 3569184

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. Ms. George-Ann Hyams

Mailing Address 627 San Lorenzo St.

City State Zip Code
Santa Monica CA 90402

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

Name of Employer Occupation
Producer/alzheimer's advocacy George spota Productions, Inc.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 10 / 2013
Transaction ID : 3554744

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
C. Dr. Margaret Jean Intons-Peterson

Mailing Address 2200 E. Maxwell Lane

City State Zip Code
Bloomington IN 47401

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

Name of Employer Occupation
Retired professor Formerly Indiana University

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 25 / 2013
Transaction ID : 3566456

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2820.00

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 126 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Margaret Jean Intons-Peterson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2200 E. Maxwell Lane
 City Bloomington State IN Zip Code 47401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired professor Occupation Formerly Indiana University
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 15 / 2013
Transaction ID : 3556581
 Amount of Each Receipt this Period
 200.00

B. Ms. Lesley Israel
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 69
 City Royal Oak State MD Zip Code 21662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 19 / 2013
Transaction ID : 3560560
 Amount of Each Receipt this Period
 500.00

C. Ms. Audrey Jackson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2381 Benjamin Ct
 City Rocklin State CA Zip Code 95765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3563587
 Amount of Each Receipt this Period
 300.00

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: (check only one)	PAGE 127 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Alethia Jackson		Date of Receipt
Mailing Address 1399 New York Avenue NW Ste. 725		<input type="text" value="01"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3554897
Name of Employer REQUESTED	Occupation REQUESTED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) B. Dr. Geraldine M. Jacobson		Date of Receipt
Mailing Address 924 Suncrest Place		<input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City Morgantown	State WV	Zip Code 26505
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3560594
Name of Employer physician	Occupation West Virginia University	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Barbara Jakobson		Date of Receipt
Mailing Address 167 E 74th St.		<input type="text" value="01"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3565451
Name of Employer REQUESTED	Occupation REQUESTED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
	<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 128 OF 578
(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)
EMILY's List

A. Ms. Sheila Jefferson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1226 Warner Ave., Apt. 102
 City Los Angeles State CA Zip Code 90024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation none
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 23 / 2013
Transaction ID : 3563994
 Amount of Each Receipt this Period
250.00

B. Ms. Anne K. Jeffrey
 Full Name (Last, First, Middle Initial)
 Mailing Address 296 Ashboune Pl
 City Columbus State OH Zip Code 43209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation none
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3570005
 Amount of Each Receipt this Period
500.00

C. Julie Jennings
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 Stonewall St,
 City Lexington State VA Zip Code 24450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Clinical Psychologist Occupation self employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 05 / 2013
Transaction ID : 3551287
 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 129 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Marla D Jensen
 Full Name (Last, First, Middle Initial)
 Mailing Address 1945 Silverleaf Circle
 City Carlsbad State CA Zip Code 92009
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : 3550252
 Amount of Each Receipt this Period
 250.00

B. Mr. Allan E Johannesen
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Carleton Rd.
 City Rochdale State MA Zip Code 1542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Computer Programmer Occupation WPI
 Receipt For: 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
 01 / 07 / 2013
Transaction ID : 3553755
 Amount of Each Receipt this Period
 1000.00

C. Ms. Lucy Johns
 Full Name (Last, First, Middle Initial)
 Mailing Address 561 Greenwich St
 City San Francisco State CA Zip Code 94133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PLANNER Occupation Self
 Receipt For: 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
 01 / 02 / 2013
Transaction ID : 3550239
 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: (check only one)	PAGE 130 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Sandra K. Johnson		Date of Receipt
Mailing Address 6827 Rosemary Lane		<input type="text" value="01"/> / <input type="text" value="11"/> / <input type="text" value="2013"/>
City	State	Zip Code
Charlotte	NC	28210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3555414
Name of Employer	Occupation	Amount of Each Receipt this Period
Manager	Plastic Labeling, LLC	<input type="text" value="80.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="280.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Sandra K. Johnson		Date of Receipt
Mailing Address 6827 Rosemary Lane		<input type="text" value="01"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
Charlotte	NC	28210
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3559049
Name of Employer	Occupation	Amount of Each Receipt this Period
Manager	Plastic Labeling, LLC	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="280.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Marcia K. Johnson		Date of Receipt
Mailing Address 360 State Street #3008		<input type="text" value="01"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
New Haven	CT	6510
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3552758
Name of Employer	Occupation	Amount of Each Receipt this Period
PROFESSOR	Yale University	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1280.00"/>
TOTAL 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: (check only one)	PAGE 131 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Elaine Johnston

Mailing Address 831 South Fairfax Street

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 08 / 2013
Transaction ID : 3554150

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Ms. Marilyn Johnston

Mailing Address 1203 E Washington St Apt 121

City State Zip Code
Washington IA 52353

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

Name of Employer Occupation
RETIRED none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 18 / 2013
Transaction ID : 3570004

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Ms. Rosalyn E. Jonas

Mailing Address 6716 Melody Ln.

City State Zip Code
Bethesda MD 20817

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

Name of Employer Occupation
Requested Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 24 / 2013
Transaction ID : 3565472

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00

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 132 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Rosalyn E. Jonas
 Full Name (Last, First, Middle Initial)
 Mailing Address 6716 Melody Ln.
 City Bethesda State MD Zip Code 20817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation Requested
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554148
 Amount of Each Receipt this Period
250.00

B. David Jones
 Full Name (Last, First, Middle Initial)
 Mailing Address 441 10th St NE
 City Washington State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Partner Occupation Capitol Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : 3558265
 Amount of Each Receipt this Period
1000.00

C. Mr. Kenneth Malcolm Jones
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 45
 City West Tisbury State MA Zip Code 2575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 07 / 2013
Transaction ID : 3552753
 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 133 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Sally B. Jorgensen
 Full Name (Last, First, Middle Initial)
 Mailing Address 1615 E River Pkwy
 City State Zip Code
 Minneapolis MN 55414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 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
 01 / 28 / 2013
Transaction ID : 3568086
 Amount of Each Receipt this Period
 300.00

B. Ms. Emily Mason Kahn
 Full Name (Last, First, Middle Initial)
 Mailing Address 32 W 20th Street
 City State Zip Code
 New York NY 10011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Artist Hunter College
 Receipt For:
 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
 01 / 17 / 2013
Transaction ID : 3558032
 Amount of Each Receipt this Period
 1000.00

C. Mrs. Martha Breedlove Kahn
 Full Name (Last, First, Middle Initial)
 Mailing Address 23480 Ravensbury Ave
 City State Zip Code
 Los Altos Hills CA 94024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired none
 Receipt For:
 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
 01 / 15 / 2013
Transaction ID : 3556244
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2300.00
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 134 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Katherine S. Kaiser
 Full Name (Last, First, Middle Initial)
 Mailing Address 88 White Clover Ln
 City Highlands State NC Zip Code 28741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2013
Transaction ID : 3568540
 Amount of Each Receipt this Period
 500.00

B. Jay Kajimura
 Full Name (Last, First, Middle Initial)
 Mailing Address 3627 Lupine Ave
 City Palo Alto State CA Zip Code 94303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation self
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : 3550350
 Amount of Each Receipt this Period
 25.00

C. Jay Kajimura
 Full Name (Last, First, Middle Initial)
 Mailing Address 3627 Lupine Ave
 City Palo Alto State CA Zip Code 94303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation self
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : 3550324
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	775.00
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 135 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Jay Kajimura		Date of Receipt MM / DD / YYYY 01 / 03 / 2013 Transaction ID : 3550325
Mailing Address 3627 Lupine Ave		Amount of Each Receipt this Period 250.00
City Palo Alto	State CA	Zip Code 94303
FEC ID number of contributing federal political committee. C		
Name of Employer retired	Occupation self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name (Last, First, Middle Initial) B. Ms. Linda Kanarek		Date of Receipt MM / DD / YYYY 01 / 22 / 2013 Transaction ID : 3563582
Mailing Address 3450 Sacramento St. # 719		Amount of Each Receipt this Period 300.00
City San Francisco	State CA	Zip Code 94118
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation none	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Kollyn Kanz		Date of Receipt MM / DD / YYYY 01 / 20 / 2013 Transaction ID : 3561952
Mailing Address 934 2nd Street Unit 6		Amount of Each Receipt this Period 500.00
City Santa Monica	State CA	Zip Code 90403
FEC ID number of contributing federal political committee. C		
Name of Employer Banker	Occupation US Bank	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
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 136 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Lisa Kaplowitz		Date of Receipt MM / DD / YYYY 01 / 03 / 2013 Transaction ID : 3550286
Mailing Address 2228 King Street		Amount of Each Receipt this Period 1000.00
City Alexandria	State VA	Zip Code 22301
FEC ID number of contributing federal political committee. C	Name of Employer Health Director	Occupation Virginia Dept of Health
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Dr. Terry L. Karl		Date of Receipt MM / DD / YYYY 01 / 07 / 2013 Transaction ID : 3553604
Mailing Address 968 Sanchez Street		Amount of Each Receipt this Period 250.00
City San Francisco	State CA	Zip Code 94114
FEC ID number of contributing federal political committee. C	Name of Employer professor	Occupation Stanford University
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Sheridan L Kassirer		Date of Receipt MM / DD / YYYY 01 / 25 / 2013 Transaction ID : 3566453
Mailing Address 21 Squirrel Road		Amount of Each Receipt this Period 250.00
City Wellesley	State MA	Zip Code 2481
FEC ID number of contributing federal political committee. C	Name of Employer Healthcare executive	Occupation Partners Healthcare
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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: (check only one)	PAGE 137 OF 578
	<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)
EMILY's List

A. Ms. Joyce C. Kathan
Full Name (Last, First, Middle Initial)

Mailing Address 229 Cheshire RD

City Prospect State CT Zip Code 6712

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

Name of Employer SOCIAL WORKER Occupation Retired

Receipt For:
 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
 01 / 03 / 2013
Transaction ID : 3550284

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 1425 N Carolina Ave NE

City Washington State DC Zip Code 20002

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

Name of Employer Media planning & placement Occupation MKM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 16 / 2013
Transaction ID : 3557109

Amount of Each Receipt this Period
 500.00

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

Mailing Address 2 Starview Drive

City Oakland State CA Zip Code 94618

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

Name of Employer Dean Occupation San Francisco State University

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 07 / 2013
Transaction ID : 3552380

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

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 138 OF 578
	<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)
EMILY's List

A. Ms. Betsy A. Keefer
Full Name (Last, First, Middle Initial)
Mailing Address 2500 Fairway Dr.
City York State PA Zip Code 17402
FEC ID number of contributing federal political committee. **C**
Name of Employer Executive Occupation Girl Scouts Of U.S.A.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
01 / 31 / 2013
Transaction ID : 3570442
Amount of Each Receipt this Period
300.00

B. Mrs. Cele S. Keeper
Full Name (Last, First, Middle Initial)
Mailing Address 2929 Buffalo Speedway Unit 203
City Houston State TX Zip Code 77098
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation none
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
01 / 22 / 2013
Transaction ID : 3561559
Amount of Each Receipt this Period
250.00

C. Ms. Sally Keil
Full Name (Last, First, Middle Initial)
Mailing Address 1219 Route 171
City Woodstock State CT Zip Code 6281
FEC ID number of contributing federal political committee. **C**
Name of Employer president Occupation AcquiData, Inc.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
01 / 25 / 2013
Transaction ID : 3566178
Amount of Each Receipt this Period
1000.00

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: (check only one)	PAGE 139 OF 578
	<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)
EMILY's List

A. Ms. Barbara I. Keller
Full Name (Last, First, Middle Initial)

Mailing Address 5923 18th St N.

City Arlington State VA Zip Code 22205

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

Name of Employer gov't Occupation Dept. of the Treasury

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 04 / 2013

Transaction ID : 3550329

Amount of Each Receipt this Period
250.00

B. Mr. Keith E. Keller
Full Name (Last, First, Middle Initial)

Mailing Address 3944 Trophy Blvd

City New Port Richey State FL Zip Code 34655

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

Name of Employer RETIRED Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 29 / 2013

Transaction ID : 3569190

Amount of Each Receipt this Period
300.00

C. Ms. Maureen Kelly
Full Name (Last, First, Middle Initial)

Mailing Address 1634 Herrin Street

City Redondo Beach State CA Zip Code 90278

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

Name of Employer RETIRED Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 18 / 2013

Transaction ID : 3570101

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	800.00
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 140 OF 578
	<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)
EMILY's List

A. Dr. Sally J Kenney
Full Name (Last, First, Middle Initial)

Mailing Address 537 Broadway

City New Orleans State LA Zip Code 70118

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

Name of Employer University Administrator Occupation Tulane University

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 01 / 2013
Transaction ID : 3548787

Amount of Each Receipt this Period
 250.00

B. Ms. Carol S. Kenyon
Full Name (Last, First, Middle Initial)

Mailing Address 197 Walter Hays DR

City Palo Alto State CA Zip Code 94303

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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 19 / 2013
Transaction ID : 3561360

Amount of Each Receipt this Period
 1000.00

C. Ms. Amie L Kershner
Full Name (Last, First, Middle Initial)

Mailing Address 3114 E. Baltimore St.

City Washington State DC Zip Code 20003

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

Name of Employer Director Occupation DSCC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 14 / 2013
Transaction ID : 3554873

Amount of Each Receipt this Period
 250.00

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: (check only one)	PAGE 141 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Paulette Kessler		Date of Receipt MM / DD / YYYY 01 / 18 / 2013 Transaction ID : 3559922
Mailing Address 2715 Steiner Street		Amount of Each Receipt this Period 250.00
City San Francisco	State CA	Zip Code 94123
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 250.00
Name of Employer Lawyer	Occupation Self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Floride B. Kidder		Date of Receipt MM / DD / YYYY 01 / 18 / 2013 Transaction ID : 3569995
Mailing Address 12616 N Crescent DR		Amount of Each Receipt this Period 1000.00
City Dunlap	State IL	Zip Code 61525
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1000.00
Name of Employer Business Owner	Occupation Kidder Music	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. Caroline A Kilbourne		Date of Receipt MM / DD / YYYY 01 / 20 / 2013 Transaction ID : 3561699
Mailing Address 10101 Grosvenor Pl., #1910 #714		Amount of Each Receipt this Period 250.00
City North Bethesda	State MD	Zip Code 20852
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 250.00
Name of Employer physicist	Occupation NASA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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: (check only one)	PAGE 142 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Eleanor M. Kilgour		Date of Receipt
Mailing Address PO Box 4260		<input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2013"/>
City	State	Zip Code
Chapel Hill	NC	27515
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3548878
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="3000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Anne Kimball		Date of Receipt
Mailing Address 14890 David Drive		<input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code
Fort Myers	FL	33908
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3565719
Name of Employer	Occupation	Amount of Each Receipt this Period
Retired	None	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Anne Kimball		Date of Receipt
Mailing Address 14890 David Drive		<input type="text" value="01"/> / <input type="text" value="09"/> / <input type="text" value="2013"/>
City	State	Zip Code
Fort Myers	FL	33908
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3554210
Name of Employer	Occupation	Amount of Each Receipt this Period
Retired	None	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="3250.00"/>
TOTAL 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 143 OF 578
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Faye Kimerling		Date of Receipt
Mailing Address 452 Ansley Walk Terrace		<input type="text" value="01"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City State Zip Code Atlanta GA 30309		Transaction ID : 3559092
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer career counselor- retired	Occupation self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Kay K. Kimpton		Date of Receipt
Mailing Address 2620 Jackson St		<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City State Zip Code San Francisco CA 94115		Transaction ID : 3569481
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer Designer	Occupation Self Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Barbara L. King		Date of Receipt
Mailing Address 10100 Cypress Cove DR Apt 106		<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City State Zip Code Fort Myers FL 33908		Transaction ID : 3564199
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer retired	Occupation none	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 144 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Thomas King

Mailing Address 777 Bayshore DR Apt 1404

City State Zip Code
Fort Lauderdale FL 33304

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

Name of Employer Occupation
RETIRED none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3563159

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Mr. Charles King

Mailing Address 3061 Fairfax Road

City State Zip Code
Cleveland Heights OH 44118

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

Name of Employer Occupation
PHYSICIAN Casa Western Reserve Univ

Receipt For:
 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
 01 / 28 / 2013
Transaction ID : 3568101

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
c. Ms. Catherine F. Kinney

Mailing Address 26 Sierra Del Sol

City State Zip Code
Santa Fe NM 87508

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

Name of Employer Occupation
consultant Kinney Associates

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3559727

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00

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 145 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Elizabeth H. Kinney

Full Name (Last, First, Middle Initial)
Mailing Address 920 E Deerpath Rd

City Lake Forest State IL Zip Code 60045

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

Name of Employer none Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 01 / 15 / 2013
Transaction ID : 3555983
 Amount of Each Receipt this Period: 250.00

B. Mr. Douglas M. Kinney

Full Name (Last, First, Middle Initial)
Mailing Address 920 E Deerpath Road

City Lake Forest State IL Zip Code 60045

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

Name of Employer Retired Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 01 / 21 / 2013
Transaction ID : 3562078
 Amount of Each Receipt this Period: 1000.00

C. Ms. Edith Dorosin Kirkwood

Full Name (Last, First, Middle Initial)
Mailing Address 1221 Waverley St.

City Palo Alto State CA Zip Code 94301

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

Name of Employer retired Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 01 / 03 / 2013
Transaction ID : 3550370
 Amount of Each Receipt this Period: 350.00

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: (check only one)	PAGE 146 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Robert L. Kleinberg		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 28 / 2013 Transaction ID : 3568116
Mailing Address 104 Avon Hill Street		Amount of Each Receipt this Period 250.00
City Cambridge	State MA	Zip Code 2140
FEC ID number of contributing federal political committee. C		
Name of Employer SCIENTIST	Occupation Schlumberger	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Glenda Kline		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 07 / 2013 Transaction ID : 3553234
Mailing Address 11811 Far Edge Path		Amount of Each Receipt this Period 250.00
City Columbia	State MD	Zip Code 21044
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Laura Kofoid		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 26 / 2013 Transaction ID : 3566510
Mailing Address 3920 North Lake Shore Drive Apartment 7		Amount of Each Receipt this Period 1000.00
City Chicago	State IL	Zip Code 60613
FEC ID number of contributing federal political committee. C		
Name of Employer business	Occupation Laudi Vidni	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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: (check only one)	PAGE 147 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Peggie Kohnert		Date of Receipt 01 / 10 / 2013 Transaction ID : 3554797
Mailing Address 2701 Werlein		Amount of Each Receipt this Period 500.00
City Houston	State TX	Zip Code 77005
FEC ID number of contributing federal political committee. C		
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mr. Jerry A. Kolar		Date of Receipt 01 / 16 / 2013 Transaction ID : 3556766
Mailing Address 15354 W Stearns School Rd.		Amount of Each Receipt this Period 500.00
City Gurnee	State IL	Zip Code 60031
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation none	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Ms. Ann F. Kolker		Date of Receipt 01 / 02 / 2013 Transaction ID : 3548876
Mailing Address 5524 39th St. NW		Amount of Each Receipt this Period 1000.00
City Washington	State DC	Zip Code 20015
FEC ID number of contributing federal political committee. C		
Name of Employer NON-PROFIT CONSULTANT	Occupation Self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
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 148 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Louise Kornfeld
 Full Name (Last, First, Middle Initial)
 Mailing Address 719 N. Ocean Blvd.
 City Delray Beach State FL Zip Code 33483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Consultant Occupation Kornfeld Associates International
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 25 / 2013
Transaction ID : 3566572
 Amount of Each Receipt this Period
 250.00

B. Lisa Koteen Gerchick
 Full Name (Last, First, Middle Initial)
 Mailing Address 1345 Potomac School Road
 City McLean State VA Zip Code 22101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LAWYER/HOMEMAKER Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 29 / 2013
Transaction ID : 3568543
 Amount of Each Receipt this Period
 1000.00

C. Ms. Andrea S. Kramer
 Full Name (Last, First, Middle Initial)
 Mailing Address 227 West Monroe St
 City Chicago State IL Zip Code 60606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer attorney Occupation McDermott Will & Emery
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 20 / 2013
Transaction ID : 3561854
 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: (check only one)	PAGE 149 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judith H. Kramer		Date of Receipt MM / DD / YYYY 01 / 14 / 2013 Transaction ID : 3556451
Mailing Address 372 Ferne Avenue		Amount of Each Receipt this Period 1000.00
City Palo Alto	State CA	Zip Code 94306
FEC ID number of contributing federal political committee.	C	
Name of Employer Retired	Occupation None	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms. Lisa Vick Kraus		Date of Receipt MM / DD / YYYY 01 / 20 / 2013 Transaction ID : 3561034
Mailing Address 4906 Shadywood Ln		Amount of Each Receipt this Period 1000.00
City Dallas	State TX	Zip Code 75209
FEC ID number of contributing federal political committee.	C	
Name of Employer writer	Occupation writer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Christopher Kriva		Date of Receipt MM / DD / YYYY 01 / 03 / 2013 Transaction ID : 3550260
Mailing Address 2440 S. Kinnickinnic Ave. #318		Amount of Each Receipt this Period 500.00
City Milwaukee	State WI	Zip Code 53207
FEC ID number of contributing federal political committee.	C	
Name of Employer Attorney	Occupation Reinhart, Boerner & van Deuren sc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 578
	<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)
EMILY's List

A. Mr. George W. Krumme
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 749

City Bristow	State OK	Zip Code 74010
-----------------	-------------	-------------------

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

Name of Employer REQUESTED	Occupation Krumme Oil Company, LLP
-------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2013

Transaction ID : 3569704

Amount of Each Receipt this Period
500.00

B. Ms. Estelle Kuhn
Full Name (Last, First, Middle Initial)
Mailing Address 60 W 68th St Apt 3b

City New York	State NY	Zip Code 10023
------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation estellekuhn@earthlink.net
-----------------------------	---

Receipt For:
 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
01	/	15	/	2013

Transaction ID : 3556594

Amount of Each Receipt this Period
1000.00

C. Dr. Raminder Kumar
Full Name (Last, First, Middle Initial)
Mailing Address 445 E North Water St, Apt 2505

City Chicago	State IL	Zip Code 60611
-----------------	-------------	-------------------

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

Name of Employer Retired	Occupation None
-----------------------------	--------------------

Receipt For:
 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
01	/	15	/	2013

Transaction ID : 3555999

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Ms. Ruth I. Kunin
 Full Name (Last, First, Middle Initial)
 Mailing Address 470 W End Ave., Apt. 6A
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 14 / 2013
Transaction ID : 3556410
 Amount of Each Receipt this Period
 1000.00

B. Mrs. Luann Kurnick
 Full Name (Last, First, Middle Initial)
 Mailing Address 4206 Pascal Place
 City Palos Verdes State CA Zip Code 90274
 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 ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 25 / 2013
Transaction ID : 3566517
 Amount of Each Receipt this Period
 1000.00

C. Ms. Ellen Kurz
 Full Name (Last, First, Middle Initial)
 Mailing Address 439 Lafayette St. #4
 City New York State NY Zip Code 10003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : 3558230
 Amount of Each Receipt this Period
 1250.00

SUBTOTAL of Receipts This Page (optional).....▶	3250.00
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 152 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Celinda C. Lake

Mailing Address 126 F Street, S.E.

City Washington State DC Zip Code 20003

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

Name of Employer President Occupation Lake Snell Perry & Associates, Inc.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : 3550273

Amount of Each Receipt this Period
250.00

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

Mailing Address 6 Calle Ameno

City San Clemente State CA Zip Code 92672

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

Name of Employer Physician Occupation ORPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : 3550258

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Ms. Catherine A. Lamboley

Mailing Address 2327 Seyborn St.

City Houston State TX Zip Code 77027

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3562813

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

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 153 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Carol Landsman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1015 se 69 ave
 City Portland State OR Zip Code 97215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer City planner Occupation Self
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3560079
 Amount of Each Receipt this Period
250.00

B. Ms. Tanya Lasuk
 Full Name (Last, First, Middle Initial)
 Mailing Address 409 S.Agua Mansa Court
 City Kennewick State WA Zip Code 99338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer IT Analyst Occupation Battelle
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 25 / 2013
Transaction ID : 3568413
 Amount of Each Receipt this Period
100.00

C. Ms. Tanya Lasuk
 Full Name (Last, First, Middle Initial)
 Mailing Address 409 S.Agua Mansa Court
 City Kennewick State WA Zip Code 99338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer IT Analyst Occupation Battelle
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 05 / 2013
Transaction ID : 3551624
 Amount of Each Receipt this Period
400.00

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 154 OF 578
	(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

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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Alexa Lawson-Remer		Date of Receipt
Mailing Address 2000 Washington Ave		<input type="text" value="01"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City State Zip Code Santa Monica CA 90403		Transaction ID : 3553232
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Name of Employer attorney	Occupation Sullivan & Cromwell, LLP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) B. Dr. Aili L. Lazaar		Date of Receipt
Mailing Address 1640 Forest Creek Drive		<input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City State Zip Code Blue Bell PA 19422		Transaction ID : 3566177
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer PHYSICIAN	Occupation GSK	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Lorraine LeBlanc		Date of Receipt
Mailing Address 7717 Hampson ST		<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City State Zip Code New Orleans LA 70118		Transaction ID : 3569785
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer Actor and Volunteer	Occupation Self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1750.00"/>
TOTAL 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: (check only one)	PAGE 155 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
EMILY's List

A. Stephen Leeds
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 Harris Glen
 City Atlanta State GA Zip Code 30327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer sustainability consultant/lawyer Occupation self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 06 / 2013
Transaction ID : 3552023
 Amount of Each Receipt this Period
 10.00

B. Mr. Robin Leeds
 Full Name (Last, First, Middle Initial)
 Mailing Address 3133 Connecticut Avenue NW
 City Washington State DC Zip Code 20008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Strategic Partner Occupation Winning Strategies
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 02 / 2013
Transaction ID : 3550030
 Amount of Each Receipt this Period
 250.00

C. Stephen Leeds
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 Harris Glen
 City Atlanta State GA Zip Code 30327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer sustainability consultant/lawyer Occupation self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 10 / 2013
Transaction ID : 3554818
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	510.00
TOTAL This Period (last page this line number only).....▶	

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

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

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Cindy L. Lerner
 Full Name (Last, First, Middle Initial)
 Mailing Address 5901 Moss Ranch Road
 City State Zip Code
 Pinecrest FL 33156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Attorney self
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 26 / 2013
Transaction ID : 3566711
 Amount of Each Receipt this Period
 75.00

B. Ms. Cindy L. Lerner
 Full Name (Last, First, Middle Initial)
 Mailing Address 5901 Moss Ranch Road
 City State Zip Code
 Pinecrest FL 33156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Attorney self
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : 3550285
 Amount of Each Receipt this Period
 500.00

C. Ms. Myla Lerner
 Full Name (Last, First, Middle Initial)
 Mailing Address 160 W 66th Street, Apt 36 G
 City State Zip Code
 New York NY 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Producer self
 Receipt For:
 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
 01 / 22 / 2013
Transaction ID : 3563671
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1575.00
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 157 OF 578
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jill T L'Esperance
 Full Name (Last, First, Middle Initial)
 Mailing Address 1114 Euclid Ave
 City Berkeley State CA Zip Code 94708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired - Public Social Services Occupation Alameda County Social Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 24 / 2013
Transaction ID : 3565665
 Amount of Each Receipt this Period
 250.00

B. Ms. Salli E. Levan
 Full Name (Last, First, Middle Initial)
 Mailing Address 340 Brayward Chase
 City Roswell State GA Zip Code 30076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 30 / 2013
Transaction ID : 3569793
 Amount of Each Receipt this Period
 1500.00

C. Ms. Laurie Leventhal-Belfer
 Full Name (Last, First, Middle Initial)
 Mailing Address 4275 Los Palos Avenue
 City Palo Alto State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer psychologist Occupation self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 19 / 2013
Transaction ID : 3561364
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
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 158 OF 578
	<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)
EMILY's List

A. Mr. L. David David Leverenz
 Full Name (Last, First, Middle Initial)
 Mailing Address 2150 NW 2nd Ave.
 City Gainesville State FL Zip Code 32603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired English professor Occupation University of Florida
 Receipt For: 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
 01 / 07 / 2013
Transaction ID : 3553485
 Amount of Each Receipt this Period
 350.00

B. Ms. Shellie Sachs Levin
 Full Name (Last, First, Middle Initial)
 Mailing Address 22800 SW 157 Avenue
 City Miami State FL Zip Code 33170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation EMILY's List
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554146
 Amount of Each Receipt this Period
 500.00

C. Ms. Penny Levin
 Full Name (Last, First, Middle Initial)
 Mailing Address 355 Boca Ceiga Dr.
 City Madeira Beach State FL Zip Code 33708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation None
 Receipt For: 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
 01 / 29 / 2013
Transaction ID : 3569324
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1850.00
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 159 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Shellie Sachs Levin
 Full Name (Last, First, Middle Initial)
 Mailing Address 22800 SW 157 Avenue
 City Miami State FL Zip Code 33170
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Consultant Occupation Self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554145
 Amount of Each Receipt this Period
 1500.00

B. Ms. Marcia W. Levine
 Full Name (Last, First, Middle Initial)
 Mailing Address 2678 Rochester Rd.
 City Shaker Heights State OH Zip Code 44122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : 3558035
 Amount of Each Receipt this Period
 1000.00

C. Myra Levy
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 Wright Road
 City Rockville Centre State NY Zip Code 11570
 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 ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3563682
 Amount of Each Receipt this Period
 350.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2850.00
TOTAL This Period (last page this line number only)..... ▶

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

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FOR LINE NUMBER: PAGE 160 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Judith L. Lichtman

Mailing Address 1875 Connecticut Avenue, NW
Suite 650

City Washington State DC Zip Code 20009

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

Name of Employer Attorney Occupation National partnership for women and fam

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 14 / 2013
Transaction ID : 3554874

Amount of Each Receipt this Period
250.00

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

Mailing Address 32 Littleworth Lane

City Sea Cliff State NY Zip Code 11579

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

Name of Employer MD Occupation Mt Sinai Medical Center

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 01 / 2013
Transaction ID : 3548663

Amount of Each Receipt this Period
1500.00

Full Name (Last, First, Middle Initial)
C. Mr. Mark Liebow

Mailing Address 1018 Hickory Ln. SW

City Rochester State MN Zip Code 55902

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

Name of Employer Physician Occupation Mayo Foundation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 07 / 2013
Transaction ID : 3552743

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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 161 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Peter R. Limburg
 Full Name (Last, First, Middle Initial)
 Mailing Address 229 Bedford-Banksville Road
 City Bedford State NY Zip Code 10506
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : 3558093
 Amount of Each Receipt this Period
 250.00

B. Ms. Mildred M. Lippke
 Full Name (Last, First, Middle Initial)
 Mailing Address 617 Cenizo Blvd
 City Uvalde State TX Zip Code 78801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOME MAKER Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3562808
 Amount of Each Receipt this Period
 250.00

C. Laura Lippman
 Full Name (Last, First, Middle Initial)
 Mailing Address 2311 N. 45th St. #171
 City Seattle State WA Zip Code 98103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation NA
 Receipt For: 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
 01 / 23 / 2013
Transaction ID : 3563996
 Amount of Each Receipt this Period
 1000.00

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: (check only one)	PAGE 162 OF 578
	<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)
EMILY's List

A. Ms. Susan M. Liss
Full Name (Last, First, Middle Initial)
Mailing Address 7101 Beechwood Drive
City Chevy Chase State MD Zip Code 20815
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation Brennan Center -- NYU Law School
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt
MM / DD / YYYY
01 / 08 / 2013
Transaction ID : 3554149
Amount of Each Receipt this Period
1000.00

B. Ms. Melissa E. Little
Full Name (Last, First, Middle Initial)
Mailing Address 6300 Creedmoor Rd., Ste 170, #
City Raleigh State NC Zip Code 27612
FEC ID number of contributing federal political committee. **C**
Name of Employer Attorney/Consultant Occupation Credit Risk Management, LLC
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt
MM / DD / YYYY
01 / 08 / 2013
Transaction ID : 3553905
Amount of Each Receipt this Period
250.00

C. Ms. Katharine K. Lockwood-Lang
Full Name (Last, First, Middle Initial)
Mailing Address 700 Terrace St
City Ashland State OR Zip Code 97520
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt
MM / DD / YYYY
01 / 21 / 2013
Transaction ID : 3562073
Amount of Each Receipt this Period
300.00

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 163 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Judy Loeb Goldfein
 Full Name (Last, First, Middle Initial)
 Mailing Address 135 East 71st Apt 9D
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554144
 Amount of Each Receipt this Period
 250.00

B. Ms. Trudi K. Loh
 Full Name (Last, First, Middle Initial)
 Mailing Address 2125 Upper Ranch Road
 City Westlake Village State CA Zip Code 91362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Attorney Occupation Self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 13 / 2013
Transaction ID : 3555072
 Amount of Each Receipt this Period
 200.00

C. Ms. Trudi K. Loh
 Full Name (Last, First, Middle Initial)
 Mailing Address 2125 Upper Ranch Road
 City Westlake Village State CA Zip Code 91362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Attorney Occupation Self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 10 / 2013
Transaction ID : 3554812
 Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2950.00
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 164 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Sarajane N. Love
 Full Name (Last, First, Middle Initial)
 Mailing Address 1091 Greystone Ln E
 City State Zip Code
 Watkinsville GA 30677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Professor University of Georgia
 Receipt For:
 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
 01 / 22 / 2013
Transaction ID : 3562822
 Amount of Each Receipt this Period
 1000.00

B. Dr. Sheree C. Lovell
 Full Name (Last, First, Middle Initial)
 Mailing Address 4227 Partridge Lane
 City State Zip Code
 Midlan MI 48640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Family physician MidMichigan Physicians' Group
 Receipt For:
 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
 01 / 28 / 2013
Transaction ID : 3568087
 Amount of Each Receipt this Period
 300.00

C. Ms. Julie B. Lovins
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O.Box 390689
 City State Zip Code
 Mountain View CA 94039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired none
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554084
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional).....▶	1330.00
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 165 OF 578
<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)
EMILY's List

A. Ms. Julie B. Lovins
Full Name (Last, First, Middle Initial)

Mailing Address P.O.Box 390689

City Mountain View	State CA	Zip Code 94039
-----------------------	-------------	-------------------

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

Name of Employer Retired	Occupation none
-----------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 05 / 2013

Transaction ID : 3551924

Amount of Each Receipt this Period
250.00

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

Mailing Address 1625 E Arlington Dr

City Salt Lake City	State UT	Zip Code 84103
------------------------	-------------	-------------------

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

Name of Employer Retired Counselor	Occupation Self
---------------------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 25 / 2013

Transaction ID : 3566430

Amount of Each Receipt this Period
250.00

C. Ms. Sandra Lowery
Full Name (Last, First, Middle Initial)

Mailing Address 6627 Sewanee Ave

City Houston	State TX	Zip Code 77005
-----------------	-------------	-------------------

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

Name of Employer Sales	Occupation S&R Resources, Inc.
---------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 22 / 2013

Transaction ID : 3562814

Amount of Each Receipt this Period
1000.00

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: (check only one)	PAGE 166 OF 578
	<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)
EMILY's List

A. Ms. Pamela L Lowry
Full Name (Last, First, Middle Initial)
Mailing Address 27 Oak Road
City Santa Cruz State CA Zip Code 95060
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 **5000.00**

Date of Receipt **01 / 27 / 2013**
Transaction ID : 3566858
Amount of Each Receipt this Period **5000.00**

B. Ms. Mary Dell Lucas
Full Name (Last, First, Middle Initial)
Mailing Address 175 Reservoir Rd.
City San Rafael State CA Zip Code 94901
FEC ID number of contributing federal political committee. **C**
Name of Employer tour operator Occupation Far Horizons
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **275.00**

Date of Receipt **01 / 14 / 2013**
Transaction ID : 3556307
Amount of Each Receipt this Period **10.00**

C. Ms. Mary Dell Lucas
Full Name (Last, First, Middle Initial)
Mailing Address 175 Reservoir Rd.
City San Rafael State CA Zip Code 94901
FEC ID number of contributing federal political committee. **C**
Name of Employer tour operator Occupation Far Horizons
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **275.00**

Date of Receipt **01 / 23 / 2013**
Transaction ID : 3565750
Amount of Each Receipt this Period **15.00**

SUBTOTAL of Receipts This Page (optional)..... **5025.00**
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 167 OF 578
	<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)
EMILY's List

A. Ms. Mary Dell Lucas
Full Name (Last, First, Middle Initial)

Mailing Address 175 Reservoir Rd.

City San Rafael State CA Zip Code 94901

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

Name of Employer: tour operator Occupation: Far Horizons

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
01 / 07 / 2013

Transaction ID : 3553316

Amount of Each Receipt this Period
250.00

B. Dr. Carolyn J. Lukensmeyer
Full Name (Last, First, Middle Initial)

Mailing Address 2312 19th St NW

City Washington State DC Zip Code 20009

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

Name of Employer: EXECUTIVE DIRECTOR Occupation: University of Arizona

Receipt For:
 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
01 / 29 / 2013

Transaction ID : 3569193

Amount of Each Receipt this Period
300.00

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

Mailing Address 321 West 76 St Apt.. 4a

City New York State NY Zip Code 10023

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

Name of Employer: Licensed Mental Health Counselor Occupation: self

Receipt For:
 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
01 / 29 / 2013

Transaction ID : 3568536

Amount of Each Receipt this Period
1000.00

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: (check only one)	PAGE 168 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Tamera S. Luzzatto		Date of Receipt M M / D D / Y Y Y Y Y 01 / 10 / 2013 Transaction ID : 3554814
Mailing Address 3014 32nd Street NW		Amount of Each Receipt this Period 1000.00
City Washington	State DC	Zip Code 20008
FEC ID number of contributing federal political committee. C	Name of Employer non-profit manager	Occupation The Pew Charitable Trusts
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Ms. Tamera S. Luzzatto		Date of Receipt M M / D D / Y Y Y Y Y 01 / 13 / 2013 Transaction ID : 3555104
Mailing Address 3014 32nd Street NW		Amount of Each Receipt this Period 1000.00
City Washington	State DC	Zip Code 20008
FEC ID number of contributing federal political committee. C	Name of Employer non-profit manager	Occupation The Pew Charitable Trusts
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Ms. Lisa M. Maatz		Date of Receipt M M / D D / Y Y Y Y Y 01 / 14 / 2013 Transaction ID : 3555431
Mailing Address 1119 O Street N.W. #2		Amount of Each Receipt this Period 1000.00
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C	Name of Employer Director of Public P	Occupation American Association of University Wom
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 578
	<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)
EMILY's List

A. Ms. Leanne Hull MacDougall
 Full Name (Last, First, Middle Initial)
 Mailing Address 8317 LaJolla Shores Drive
 City La Jolla State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Art Dealer Leanne Hull Fine Art
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554116
 Amount of Each Receipt this Period
 500.00

B. Ms. May K MacNab
 Full Name (Last, First, Middle Initial)
 Mailing Address 9057 E Shorewood DR Apt 2307
 City Mercer Island State WA Zip Code 98040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired N/A
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 16 / 2013
Transaction ID : 3558095
 Amount of Each Receipt this Period
 250.00

C. Ms. Mimi L Mager
 Full Name (Last, First, Middle Initial)
 Mailing Address 2713 Rittenhouse St NW
 City Washington State DC Zip Code 20015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pres, public policy firm Mager & Associates
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554223
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
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 170 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lesley R. Mahaffey		Date of Receipt M M / D D / Y Y Y Y Y 01 / 28 / 2013 Transaction ID : 3568090
Mailing Address 1013 N Mountain View Pl		Amount of Each Receipt this Period 250.00
City Fullerton	State CA	Zip Code 92831
FEC ID number of contributing federal political committee.	C	
Name of Employer RETIRED	Occupation none	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mrs. Barbara H. Malcolm		Date of Receipt M M / D D / Y Y Y Y Y 01 / 18 / 2013 Transaction ID : 3570006
Mailing Address PO Box 1205		Amount of Each Receipt this Period 1000.00
City Nantucket	State MA	Zip Code 2554
FEC ID number of contributing federal political committee.	C	
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Ms. Ann Malester		Date of Receipt M M / D D / Y Y Y Y Y 01 / 01 / 2013 Transaction ID : 3548785
Mailing Address 5432 30th Place NW		Amount of Each Receipt this Period 1000.00
City Washington	State DC	Zip Code 20015
FEC ID number of contributing federal political committee.	C	
Name of Employer Attorney	Occupation Weil, Gotshal & Manges LLP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 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 171 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Kathleen A. Maloy , Ph.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Pinehurst Circle
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer health equity consultant Occupation self-employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 26 / 2013
Transaction ID : 3566716
 Amount of Each Receipt this Period
 2500.00

B. Audrey Mandela
 Full Name (Last, First, Middle Initial)
 Mailing Address 114 Strathmore Road, Apt 306 Apt. 306
 City Brighton State MA Zip Code 2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Consultant Occupation Mandela Associates
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : 3550380
 Amount of Each Receipt this Period
 350.00

C. Ms. Doris Manock
 Full Name (Last, First, Middle Initial)
 Mailing Address 1045 E. Swift Avenue
 City Fresno State CA Zip Code 93704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACADEMIC COUNSELOR Occupation Fresno City College
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 30 / 2013
Transaction ID : 3569703
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3150.00
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 172 OF 578
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. C. D. Manwaring		Date of Receipt MM / DD / YYYY 01 / 15 / 2013 Transaction ID : 3556580
Mailing Address 460 N Franklin St Apt. 205		Amount of Each Receipt this Period 250.00
City Syracuse	State Zip Code NY 13204	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Elaine R. Margolis		Date of Receipt MM / DD / YYYY 01 / 17 / 2013 Transaction ID : 3558034
Mailing Address 3607 Fair Oaks Pl		Amount of Each Receipt this Period 1000.00
City Longboat Key	State Zip Code FL 34228	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer Writer	Occupation Self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Patricia H. Marino		Date of Receipt MM / DD / YYYY 01 / 22 / 2013 Transaction ID : 3562792
Mailing Address 162 N Main St		Amount of Each Receipt this Period 1000.00
City Cranbury	State Zip Code NJ 8512	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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 173 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. Emerson Markham
 Full Name (Last, First, Middle Initial)
 Mailing Address 3158 Gracefield Road Apt. 209
 City State Zip Code
 Silver Spring MD 20904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 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
 01 / 15 / 2013
Transaction ID : 3556595
 Amount of Each Receipt this Period
 1000.00

B. Michael Markopoulos
 Full Name (Last, First, Middle Initial)
 Mailing Address 2683 Via De La Valle G626
 City State Zip Code
 Del Mar CA 92014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Business sef
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 07 / 2013
Transaction ID : 3552616
 Amount of Each Receipt this Period
 250.00

C. Ms. Mary E. Marshall
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 NW Lovejoy Street, Apt. 714
 City State Zip Code
 Portland OR 97209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Teacher none
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2013
Transaction ID : 3569487
 Amount of Each Receipt this Period
 250.00

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: (check only one)	PAGE 174 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Sheila P. Marshall		Date of Receipt
Mailing Address 244 Springline Dr		<input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
City State Zip Code Vero Beach FL 32963		Transaction ID : 3562082
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Name of Employer Retired	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) B. Mr. Richard Martin		Date of Receipt
Mailing Address 1823 Vineyard Avenue		<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City State Zip Code St. Helena CA 94574		Transaction ID : 3566927
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="300.00"/>
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Suzanne Massey		Date of Receipt
Mailing Address 1720 Maple Avenue Apt 2610		<input type="text" value="01"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City State Zip Code Evanston IL 60201		Transaction ID : 3569997
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer RETIRED	Occupation none	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1800.00"/>
TOTAL 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: (check only one)	PAGE 175 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mrs. Joy S. Masterson		Date of Receipt
Mailing Address 4338 Briarwood Drive		<input type="text" value="01"/> / <input type="text" value="01"/> / <input type="text" value="2013"/>
City	State	Zip Code
Indianapolis	IN	46250
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3548722
Name of Employer	Occupation	Amount of Each Receipt this Period
Retired	Retired	<input type="text" value="1200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1200.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Sharlot L. Mather		Date of Receipt
Mailing Address 400 S Burnside Ave Apt. 1K		<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
Los Angeles	CA	90036
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3568761
Name of Employer	Occupation	Amount of Each Receipt this Period
Retired	N/A	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. Mr. Donald F. Maxstadt		Date of Receipt
Mailing Address 433B Mesquite Ln		<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
Laredo	TX	78041
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3566926
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	Social Worker	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1750.00"/>
TOTAL 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: (check only one)	PAGE 176 OF 578
	<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)
EMILY's List

A. Ms. Felicia B. May
 Full Name (Last, First, Middle Initial)
 Mailing Address 3360 E 4th St.
 City Tucson State AZ Zip Code 85716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2013
Transaction ID : 3569181
 Amount of Each Receipt this Period
 250.00

B. Ms. Martha Mayo
 Full Name (Last, First, Middle Initial)
 Mailing Address 3980 E Loch Alpine Dr.
 City Ann Arbor State MI Zip Code 48103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Market Research Occupation STARS, Inc.
 Receipt For: 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
 01 / 11 / 2013
Transaction ID : 3554760
 Amount of Each Receipt this Period
 100.00

C. Ms. Martha Mayo
 Full Name (Last, First, Middle Initial)
 Mailing Address 3980 E Loch Alpine Dr.
 City Ann Arbor State MI Zip Code 48103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Market Research Occupation STARS, Inc.
 Receipt For: 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
 01 / 22 / 2013
Transaction ID : 3563188
 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 177 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Penelope L. Maza
 Full Name (Last, First, Middle Initial)
 Mailing Address 10012 Menlo Avenue
 City Silver Spring State MD Zip Code 20910
 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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3568092
 Amount of Each Receipt this Period
 300.00

B. Ms. Christy McAvoy
 Full Name (Last, First, Middle Initial)
 Mailing Address 3103 Lindo St
 City Los Angeles State CA Zip Code 90068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Architectural Historian Occupation Historic Group
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 24 / 2013
Transaction ID : 3565622
 Amount of Each Receipt this Period
 300.00

C. Ms. Kelly McBride
 Full Name (Last, First, Middle Initial)
 Mailing Address 1701 16th St, NW Apt. 752
 City Washington State DC Zip Code 20009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-employed Occupation International Development Professional
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 07 / 2013
Transaction ID : 3553961
 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: (check only one)	PAGE 178 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Kelly McBride
 Full Name (Last, First, Middle Initial)
 Mailing Address 1701 16th St, NW Apt. 752
 City Washington State DC Zip Code 20009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-employed Occupation International Development Professional
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 01 / 08 / 2013
Transaction ID : 3554218
 Amount of Each Receipt this Period
150.00

B. Maria McBride
 Full Name (Last, First, Middle Initial)
 Mailing Address 235 East 33rd Street
 City New York State NY Zip Code 10016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self employed Occupation Maria McBride
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 01 / 07 / 2013
Transaction ID : 3552384
 Amount of Each Receipt this Period
250.00

C. Ms. Margaret L. McClure
 Full Name (Last, First, Middle Initial)
 Mailing Address 129 Columbia Hgts., #53
 City Brooklyn State NY Zip Code 11201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RN Occupation Self
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 01 / 24 / 2013
Transaction ID : 3565347
 Amount of Each Receipt this Period
1000.00

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 179 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Megan L. McManemin
 Full Name (Last, First, Middle Initial)
 Mailing Address 5145 Yolanda Lane
 City Dallas State TX Zip Code 75229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 10 / 2013
Transaction ID : 3554798
 Amount of Each Receipt this Period
 2000.00

B. Ms. Laura R. McNeill
 Full Name (Last, First, Middle Initial)
 Mailing Address 77 Peachtree PL NE
 Unit 509 Cotting Court
 City Atlanta State GA Zip Code 30309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation none
 Receipt For: 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
 01 / 28 / 2013
Transaction ID : 3566913
 Amount of Each Receipt this Period
 1000.00

C. Ms. Janet K. McWhorter
 Full Name (Last, First, Middle Initial)
 Mailing Address 155 Lands End Ln
 City Friday Harbor State WA Zip Code 98250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 23 / 2013
Transaction ID : 3564161
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00
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 180 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Ilse Melamid
 Full Name (Last, First, Middle Initial)
 Mailing Address One Lincoln Plaza, Apt 16e
 City State Zip Code
 New York NY 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired N/A
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 10 / 2013
Transaction ID : 3554821
 Amount of Each Receipt this Period
 500.00

B. Ms. Suzanne Sabin Melchior
 Full Name (Last, First, Middle Initial)
 Mailing Address 159 Miraloma Drive
 City State Zip Code
 San Francisco CA 94127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Not Employed None
 Receipt For:
 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
 01 / 29 / 2013
Transaction ID : 3568492
 Amount of Each Receipt this Period
 1000.00

C. Alice Lee Melchor
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 N Michigan Ave #4601
 City State Zip Code
 Chicago IL 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired physician none
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : 3570579
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
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 181 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Jack Melton
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 Stevens Court
 City North Prairie State WI Zip Code 53153
 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 ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 04 / 2013
Transaction ID : 3552194
 Amount of Each Receipt this Period
 5000.00

B. Alan C. Mendelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 76 De Bell Drive
 City Atherton State CA Zip Code 94027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Attorney Occupation Latham & Watkins LLP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3559898
 Amount of Each Receipt this Period
 250.00

C. Ms. Lynn Meredith
 Full Name (Last, First, Middle Initial)
 Mailing Address 98 San Jacinto Boulevard
 FSR-PH
 City Austin State TX Zip Code 78701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 02 / 2013
Transaction ID : 3548877
 Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 7750.00
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 182 OF 578
	<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)
EMILY's List

A. Ms. Frances M. Merryman
Full Name (Last, First, Middle Initial)

Mailing Address 321 N. El Camino del Norte

City Tucson State AZ Zip Code 85716

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

Name of Employer Wealth Strategist Occupation Northern Trust, NA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 22 / 2013
Transaction ID : 3561561

Amount of Each Receipt this Period 250.00

B. Mrs. Grace E. Messner
Full Name (Last, First, Middle Initial)

Mailing Address 14 Council Trail

City Wilmington State DE Zip Code 19810

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 18 / 2013
Transaction ID : 3570268

Amount of Each Receipt this Period 500.00

C. Ms. Cynthia Metcalfe
Full Name (Last, First, Middle Initial)

Mailing Address 150 carondelet plz. #1702

City clayton State MO Zip Code 63105

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

Name of Employer none Occupation none

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 18 / 2013
Transaction ID : 3559450

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

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 183 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Cathleen Meyers
 Full Name (Last, First, Middle Initial)
 Mailing Address 11109 Baton Rouge Ave
 City Northridge State CA Zip Code 91326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dental Hygienist Occupation Woki
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 29 / 2013
Transaction ID : 3568773
 Amount of Each Receipt this Period
 250.00

B. Ms. Judith Greasley G. Mich
 Full Name (Last, First, Middle Initial)
 Mailing Address 915 Sunset Road
 City Ann Arbor State MI Zip Code 48103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Teacher Occupation Ann Arbor Public Schools
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 19 / 2013
Transaction ID : 3560816
 Amount of Each Receipt this Period
 250.00

C. Ms. Joyce R Michaelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Warren Place
 City Montclair State NJ Zip Code 7042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation NA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 05 / 2013
Transaction ID : 3551306
 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: (check only one)	PAGE 184 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Frances Milberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 150 E. 56th Street, #6D
 City New York State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lawyer Occupation n/a
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2013
Transaction ID : 3560348
 Amount of Each Receipt this Period
250.00

B. Caryle Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 8132 Keeler St
 City Alexandria State VA Zip Code 22309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Engineer Occupation DOE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2013
Transaction ID : 3556574
 Amount of Each Receipt this Period
500.00

C. Ms. Doranne R. Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 Pegwok Trail
 City Medford Lakes State NJ Zip Code 8055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Housewife Occupation Self
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 09 / 2013
Transaction ID : 3554621
 Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

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

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

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

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jess Millikan
 Full Name (Last, First, Middle Initial)
 Mailing Address 812 Laurelwood DR
 City San Mateo State CA Zip Code 94403
 Date of Receipt: 01 / 08 / 2013
Transaction ID : 3554119
 Amount of Each Receipt this Period: 2000.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: Lawyer Occupation: Bullivant Houser Bailey PC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 2000.00

B. Ms. Dixie L. Mills
 Full Name (Last, First, Middle Initial)
 Mailing Address 9801 Emerald Links DR
 City Tampa State FL Zip Code 33626
 Date of Receipt: 01 / 03 / 2013
Transaction ID : 3550432
 Amount of Each Receipt this Period: 100.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: Professor/Dean Occupation: IL State University
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 225.00

C. Ms. Dixie L. Mills
 Full Name (Last, First, Middle Initial)
 Mailing Address 9801 Emerald Links DR
 City Tampa State FL Zip Code 33626
 Date of Receipt: 01 / 28 / 2013
Transaction ID : 3567179
 Amount of Each Receipt this Period: 125.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: Professor/Dean Occupation: IL State University
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 225.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2225.00
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 186 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Joyanne B. Mills
 Full Name (Last, First, Middle Initial)
 Mailing Address 40W665 Grand Monde Drive
 City Elburn State IL Zip Code 60119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired none
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 20 / 2013
Transaction ID : 3561845
 Amount of Each Receipt this Period
 350.00

B. Ms. Judith T. Milone
 Full Name (Last, First, Middle Initial)
 Mailing Address 345 E 77th St Apt 5h
 City New York State NY Zip Code 10075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 24 / 2013
Transaction ID : 3565426
 Amount of Each Receipt this Period
 250.00

C. Ms. Rosemary S. Minard
 Full Name (Last, First, Middle Initial)
 Mailing Address 534 Alarid Street
 City Santa Fe State NM Zip Code 87501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3562819
 Amount of Each Receipt this Period
 1000.00

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 187 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Marianne Mitosinka
 Full Name (Last, First, Middle Initial)
 Mailing Address 250 Sheridan Avenue
 City State Zip Code
 Piedmont CA 94611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 stay at home mom n/a
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2013
Transaction ID : 3565627
 Amount of Each Receipt this Period
 500.00

B. Ms. Becky A. Moncur
 Full Name (Last, First, Middle Initial)
 Mailing Address 14078 Mahogan Avenue
 City State Zip Code
 Jacksonville FL 32258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 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
 01 / 18 / 2013
Transaction ID : 3570273
 Amount of Each Receipt this Period
 300.00

C. Ms. Elinor M. Moore
 Full Name (Last, First, Middle Initial)
 Mailing Address 6209 Mineral Point Rd., Apt. 1
 City State Zip Code
 Madison WI 53705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired none
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3568535
 Amount of Each Receipt this Period
 500.00

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 188 OF 578
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Ellen L Moran
Full Name (Last, First, Middle Initial)

Mailing Address 3106 Cummings Lane

City Chevy Chase State MD Zip Code 20816

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

Name of Employer Consultant Occupation Dewey Square Group

Receipt For:
 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
 01 / 22 / 2013
Transaction ID : 3562766

Amount of Each Receipt this Period
 1000.00

B. Mr. Ron Morgali
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1127

City Lake Oswego State OR Zip Code 97035

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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 11 / 2013
Transaction ID : 3554934

Amount of Each Receipt this Period
 250.00

C. Ms. Noreen Morgan
Full Name (Last, First, Middle Initial)

Mailing Address 21 Alida Pl.

City Ramsey State NJ Zip Code 7446

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

Name of Employer SALES Occupation The Shubert Org

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : 3558085

Amount of Each Receipt this Period
 250.00

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 189 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. Lloyd N. Morrisett

Mailing Address 12 Castle Road

City Irvington State NY Zip Code 10533

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

Name of Employer Retired Occupation NA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 12 / 2013
Transaction ID : 3554996

Amount of Each Receipt this Period
250.00

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

Mailing Address 9 Darlington Court

City Pittsburgh State PA Zip Code 15217

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

Name of Employer retired Occupation n/a

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 15 / 2013
Transaction ID : 3555719

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Ms. Katharine B. Mountcastle

Mailing Address 37 Oenoke Lane

City New Canaan State CT Zip Code 6840

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 05 / 2013
Transaction ID : 3551445

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3750.00

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 190 OF 578
	<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)
EMILY's List

A. Ms. Rosalind M. Mouser
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 8509

City Pine Bluff State AR Zip Code 71611

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 11 / 2013
Transaction ID : 3554759

Amount of Each Receipt this Period
300.00

B. Ms. Judith C. Mower
Full Name (Last, First, Middle Initial)
Mailing Address 211 W Jefferson St Apt 405 Apt. 2-504

City Syracuse State NY Zip Code 13202

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 28 / 2013
Transaction ID : 3568078

Amount of Each Receipt this Period
300.00

C. Ms. Gail Murray
Full Name (Last, First, Middle Initial)
Mailing Address 3535 Cassena Dr.

City Walnut Creek State CA Zip Code 94598

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

Name of Employer Consultant Occupation Self Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 28 / 2013
Transaction ID : 3568063

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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 191 OF 578
	<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)
EMILY's List

A. Ms. Georgia Murray
Full Name (Last, First, Middle Initial)
Mailing Address 433 Shawmut Ave
City Boston State MA Zip Code 2118
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 ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 02 / 2013
Transaction ID : 3550111
Amount of Each Receipt this Period
2500.00

B. Dr. Ann Myers
Full Name (Last, First, Middle Initial)
Mailing Address 3630 Kings Hwy
City Jackson State MS Zip Code 39216
FEC ID number of contributing federal political committee. **C**
Name of Employer physician Occupation self
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 16 / 2013
Transaction ID : 3558024
Amount of Each Receipt this Period
100.00

C. Dr. Ann Myers
Full Name (Last, First, Middle Initial)
Mailing Address 3630 Kings Hwy
City Jackson State MS Zip Code 39216
FEC ID number of contributing federal political committee. **C**
Name of Employer physician Occupation self
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 21 / 2013
Transaction ID : 3562443
Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2750.00
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 192 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Rosemarie Myerson		Date of Receipt
Mailing Address 1299 N. Tamiami Trail Apt. 521		<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City Sarasota	State FL	Zip Code 34236
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3568054
Name of Employer REQUESTED	Occupation REQUESTED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="750.00"/>
	<input type="text" value="750.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Susan Naples		Date of Receipt
Mailing Address 19151 Fowler Ave		<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City Santa Ana	State CA	Zip Code 92705
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3569705
Name of Employer Property Manager	Occupation Cardinal Property Management	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="500.00"/>
	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) C. Mary Ann Naranjo		Date of Receipt
Mailing Address PO Box 1743		<input type="text" value="01"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City Lufkin	State TX	Zip Code 75902
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3566127
Name of Employer CFO	Occupation A Pinewoods Home Health	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
	<input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 193 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Lisa D. Nash

Mailing Address 25 Seki Court

City State Zip Code
Emerald Hills CA 94062

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

Name of Employer Occupation
CEO Blue Planet Network

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : 3557807

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Ms. Nancy Neal

Mailing Address PO Box 1737

City State Zip Code
Aptos CA 95001

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

Name of Employer Occupation
Consultant Self Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554120

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Mrs. Janet E. Neff

Mailing Address 6814 Leonardo St

City State Zip Code
Coral Gables FL 33146

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

Name of Employer Occupation
Retired teacher Unemployed now

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 23 / 2013
Transaction ID : 3564484

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 194 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Joy Nelson
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 792016
 City Paia State HI Zip Code 96779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation Retired Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2013
Transaction ID : 3550665
 Amount of Each Receipt this Period
 500.00

B. Ms. Debra L Ness
 Full Name (Last, First, Middle Initial)
 Mailing Address 10721 Lady Slipper Terrace
 City Rockville State MD Zip Code 20852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation public interest National Partnership for Women & Famil
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 24 / 2013
Transaction ID : 3573582
 Amount of Each Receipt this Period
 150.00

C. Ms. Debra L Ness
 Full Name (Last, First, Middle Initial)
 Mailing Address 10721 Lady Slipper Terrace
 City Rockville State MD Zip Code 20852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation public interest National Partnership for Women & Famil
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 14 / 2013
Transaction ID : 3554872
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	900.00
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 195 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Jan Neuenschwander
 Full Name (Last, First, Middle Initial)
 Mailing Address 1145 Maxwell Lane
 City Zionsville State IN Zip Code 46077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Lawyer Barnes & Thornburg LLP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 30 / 2013
Transaction ID : 3569912
 Amount of Each Receipt this Period
 1000.00

B. Ms. Anne Newman
 Full Name (Last, First, Middle Initial)
 Mailing Address 670 West End Ave, Apt 17D
 City New York State NY Zip Code 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired self
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 25 / 2013
Transaction ID : 3566559
 Amount of Each Receipt this Period
 100.00

C. Ms. Sarah W. Newman
 Full Name (Last, First, Middle Initial)
 Mailing Address 509 8th St
 City Ann Arbor State MI Zip Code 48103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 24 / 2013
Transaction ID : 3565972
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
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 196 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Raquel H. Newman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1333 Jones St., Unit 1210
 City San Francisco State CA Zip Code 94109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation None
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 29 / 2013
Transaction ID : 3568546
 Amount of Each Receipt this Period
1000.00

B. Ms. Anne Newman
 Full Name (Last, First, Middle Initial)
 Mailing Address 670 West End Ave, Apt 17D
 City New York State NY Zip Code 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation self
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 25 / 2013
Transaction ID : 3566560
 Amount of Each Receipt this Period
2500.00

C. Ms. Claire Newton
 Full Name (Last, First, Middle Initial)
 Mailing Address 36 West Cedar Street Apt 804
 City Boston State MA Zip Code 2108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Attorney Occupation Shilepsky Hartley Robb
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 23 / 2013
Transaction ID : 3564551
 Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... **3750.00**
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 197 OF 578
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Lee H. Nicholas		Date of Receipt
Mailing Address 204 Niagara Drive		<input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code
Waterloo	IA	50701
FEC ID number of contributing federal political committee.		Transaction ID : 3565781
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Accounting Professor	University of Northern Iowa	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Sheila A. Nielsen		Date of Receipt
Mailing Address 1075 Pelham Rd.		<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code
Winnetka	IL	60093
FEC ID number of contributing federal political committee.		Transaction ID : 3563606
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr. John F. Nolen		Date of Receipt
Mailing Address 2083 Renault Ln NE		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City	State	Zip Code
Atlanta	GA	30345
FEC ID number of contributing federal political committee.		Transaction ID : 3558029
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>
Name of Employer	Occupation	
Requested	Requested	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1050.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 198 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Deborah Nord		Date of Receipt
Mailing Address 5 Hun Rd		M M M / D D D / Y Y Y Y Y Y 01 / 18 / 2013
City Princeton	State NJ	Zip Code 8540
FEC ID number of contributing federal political committee. C		Transaction ID : 3558696
Name of Employer professor		Occupation Princeton University
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period 500.00
Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. Ms. Jessye Norman		Date of Receipt
Mailing Address P.O. Box 710		M M M / D D D / Y Y Y Y Y Y 01 / 15 / 2013
City Crugers	State NY	Zip Code 10521
FEC ID number of contributing federal political committee. C		Transaction ID : 3556576
Name of Employer Artist		Occupation L"Orchidee, Inc.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period 250.00
Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth J Noyes		Date of Receipt
Mailing Address 319 South Lee Street		M M M / D D D / Y Y Y Y Y Y 01 / 15 / 2013
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C		Transaction ID : 3555789
Name of Employer retired		Occupation retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period 1000.00
Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
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 199 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Mary Ann B. Oakley
 Full Name (Last, First, Middle Initial)
 Mailing Address 2224 Kodiak DR NE
 City Atlanta State GA Zip Code 30345
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3561562
 Amount of Each Receipt this Period
 250.00

B. Ms. Suzanne Oberlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 641 manzanita Ct
 City Corte Madera State CA Zip Code 94925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer travel consultant Occupation self
 Receipt For: 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
 01 / 19 / 2013
Transaction ID : 3561407
 Amount of Each Receipt this Period
 350.00

C. Ms. Judith H Obermayer
 Full Name (Last, First, Middle Initial)
 Mailing Address 239 Chestnut St
 City West Newton State MA Zip Code 2465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3558567
 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 200 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Karen Offen
 Full Name (Last, First, Middle Initial)
 Mailing Address 450 Raymundo Drive
 City Woodside State CA Zip Code 94062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer historian Occupation self-employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 19 / 2013
Transaction ID : 3559903
 Amount of Each Receipt this Period
 1000.00

B. Ms. Patti O'Neill
 Full Name (Last, First, Middle Initial)
 Mailing Address 2209 La Mesa Drive
 City Santa Monica State CA Zip Code 90402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 16 / 2013
Transaction ID : 3558104
 Amount of Each Receipt this Period
 250.00

C. Ms. Sharon A. O'Neill
 Full Name (Last, First, Middle Initial)
 Mailing Address 519 Polk St
 City Raleigh State NC Zip Code 27604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Fundraiser Occupation UNC Chapel Hill
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3568070
 Amount of Each Receipt this Period
 250.00

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: (check only one)	PAGE 201 OF 578
	<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)
EMILY's List

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

Mailing Address 8322 North Brook Lane

City Bethesda State MD Zip Code 20814

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

Name of Employer President Occupation National Organization for Women

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 02 / 2013

Transaction ID : 3550029

Amount of Each Receipt this Period
 250.00

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

Mailing Address 8322 North Brook Lane

City Bethesda State MD Zip Code 20814

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

Name of Employer President Occupation National Organization for Women

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 08 / 2013

Transaction ID : 3554215

Amount of Each Receipt this Period
 250.00

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

Mailing Address 10327 Wilde Lake Ter

City Columbia State MD Zip Code 21044

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

Name of Employer Retired Occupation Na

Receipt For:
 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
 01 / 18 / 2013

Transaction ID : 3558953

Amount of Each Receipt this Period
 1000.00

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: (check only one)	PAGE 202 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Gregory Ostrowski

Mailing Address Psc 470 Box R

City State Zip Code
Fpo Ap AP 96534

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

Name of Employer Occupation
Retired None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 24 / 2013
Transaction ID : 3566142

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Ms. Carol Oukrop

Mailing Address 1858 Platt St.

City State Zip Code
Manhattan KS 66502

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

Name of Employer Occupation
REQUESTED Requested

Receipt For:
 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
01 / 22 / 2013
Transaction ID : 3563590

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. Mrs. Patricia Overbeck

Mailing Address 5003 Lake Lynn Dr.

City State Zip Code
Morgantown WV 26508

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

Name of Employer Occupation
N/A Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 07 / 2013
Transaction ID : 3552760

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00

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 203 OF 578
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Debby Manion Oxley
Full Name (Last, First, Middle Initial)

Mailing Address 1437 S. Boulder Suite 770

City Tulsa State OK Zip Code 74119

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

Name of Employer none Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 21 / 2013
Transaction ID : 3562617

Amount of Each Receipt this Period
 500.00

B. Mrs. Barbara R. Palmer
Full Name (Last, First, Middle Initial)

Mailing Address 425 Wjndmere Drive Apt 4b

City State College State PA Zip Code 16801

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

Name of Employer retired Occupation none

Receipt For:
 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
 01 / 19 / 2013
Transaction ID : 3560467

Amount of Each Receipt this Period
 1000.00

C. Ms. Joannie J. Parker
Full Name (Last, First, Middle Initial)

Mailing Address 1727 Warnall Avenue

City Los Angeles State CA Zip Code 90024

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

Name of Employer retired Occupation teacher

Receipt For:
 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
 01 / 17 / 2013
Transaction ID : 3558413

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1525.00

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 204 OF 578
	<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)
EMILY's List

A. Ms. Joannie J. Parker
Full Name (Last, First, Middle Initial)
Mailing Address 1727 Warnall Avenue
City Los Angeles State CA Zip Code 90024
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
01 / 08 / 2013
Transaction ID : 3553940
Amount of Each Receipt this Period
100.00

B. Ms. Joannie J. Parker
Full Name (Last, First, Middle Initial)
Mailing Address 1727 Warnall Avenue
City Los Angeles State CA Zip Code 90024
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
01 / 28 / 2013
Transaction ID : 3567940
Amount of Each Receipt this Period
100.00

C. Ms. Beverly J. Parrette
Full Name (Last, First, Middle Initial)
Mailing Address 267 Harvey Mountain RD
City Tolland State MA Zip Code 1034
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
01 / 29 / 2013
Transaction ID : 3568701
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
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 205 OF 578
	<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)
EMILY's List

A. Ms. Karen C. Parry
Full Name (Last, First, Middle Initial)
Mailing Address 3749 Windchant Circle
City Castle Rock State CO Zip Code 80104
FEC ID number of contributing federal political committee. **C**
Name of Employer system engineer Occupation Northrop Grumman
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **01 / 13 / 2013**
Transaction ID : 3555110
Amount of Each Receipt this Period **250.00**

B. Ms. Lois P. Paul
Full Name (Last, First, Middle Initial)
Mailing Address 34 Old Connecticut Path
City Wayland State MA Zip Code 1778
FEC ID number of contributing federal political committee. **C**
Name of Employer CEO, PR Agency Occupation Lois Paul and Partners
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt **01 / 26 / 2013**
Transaction ID : 3566677
Amount of Each Receipt this Period **1000.00**

C. Ms. Terry Peak
Full Name (Last, First, Middle Initial)
Mailing Address 725 Foxridge Drive
City Providence State UT Zip Code 84332
FEC ID number of contributing federal political committee. **C**
Name of Employer Professor Occupation Utah State University
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **01 / 18 / 2013**
Transaction ID : 3559652
Amount of Each Receipt this Period **250.00**

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: (check only one)	PAGE 206 OF 578
	<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)
EMILY's List

A. Ms. Betty Pecore
Full Name (Last, First, Middle Initial)
Mailing Address 1214 Berthea Street
City Houston State TX Zip Code 77006
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 01 / 22 / 2013
Transaction ID : 3562812
Amount of Each Receipt this Period 1000.00

B. Ms. Carol Pensky
Full Name (Last, First, Middle Initial)
Mailing Address 4821 W St NW
City Washington State DC Zip Code 20007
FEC ID number of contributing federal political committee. **C**
Name of Employer volunteer Occupation na
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 01 / 04 / 2013
Transaction ID : 3552107
Amount of Each Receipt this Period 1000.00

C. Mr. Joseph Pereles
Full Name (Last, First, Middle Initial)
Mailing Address 13456 Maple Ridge Ct
City Saint Louis State MO Zip Code 63141
FEC ID number of contributing federal political committee. **C**
Name of Employer VP Development Occupation Drury Hotels Company
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 01 / 20 / 2013
Transaction ID : 3561865
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: PAGE 207 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Victoria J Perkins

Mailing Address 11000 Huntover Drive

City State Zip Code
Rockville MD 20852

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

Name of Employer Occupation
attorney B. F. Saul Co.

Receipt For:
 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
 01 / 07 / 2013
Transaction ID : 3553311

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Ms. Elizabeth Perry

Mailing Address PO Box 1086

City State Zip Code
Vancouver WA 98666

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

Name of Employer Occupation
LAWYER Landerholen

Receipt For:
 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
 01 / 28 / 2013
Transaction ID : 3566912

Amount of Each Receipt this Period
1000.00

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

Mailing Address 247 Read Ford Road

City State Zip Code
Earlsville VA 22936

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 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
 01 / 08 / 2013
Transaction ID : 3554213

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 208 OF 578
	<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)
EMILY's List

A. Dr. Anne C. Petersen
Full Name (Last, First, Middle Initial)

Mailing Address 3715 Blackberry LN

City Kalamazoo State MI Zip Code 49008

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

Name of Employer retired (part-time professor) Occupation University of Michigan

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 16 / 2013
Transaction ID : 3555939

Amount of Each Receipt this Period 250.00

B. Ms. Yvonne L. Pettus
Full Name (Last, First, Middle Initial)

Mailing Address 5209 58th Ave SE

City Olympia State WA Zip Code 98513

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

Name of Employer Chief Deputy Clerk Occupation Thurston County Clerk

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 21 / 2013
Transaction ID : 3562604

Amount of Each Receipt this Period 250.00

C. Ms. Daphne Philipson
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 242

City Ardsley On Hudson State NY Zip Code 10503

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

Name of Employer none Occupation none

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 27 / 2013
Transaction ID : 3566780

Amount of Each Receipt this Period 1000.00

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: (check only one)	PAGE 209 OF 578
	<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)
EMILY's List

A. Ms. Marjorie Phillips
Full Name (Last, First, Middle Initial)
Mailing Address 71 Hawthorne Way
City Hartsdale State NY Zip Code 10530
FEC ID number of contributing federal political committee. **C**
Name of Employer homemaker Occupation na
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 20 / 2013
Transaction ID : 3561648
Amount of Each Receipt this Period
250.00

B. Ms. Margaret Phillips
Full Name (Last, First, Middle Initial)
Mailing Address 212 W Summit St
City Ann Arbor State MI Zip Code 48103
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED RN Occupation none
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 28 / 2013
Transaction ID : 3568020
Amount of Each Receipt this Period
500.00

C. Ernest Pierz
Full Name (Last, First, Middle Initial)
Mailing Address 1950 Sprucewood Ct
City Naperville State IL Zip Code 60565
FEC ID number of contributing federal political committee. **C**
Name of Employer Managing Director Occupation CBRE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 20 / 2013
Transaction ID : 3561852
Amount of Each Receipt this Period
350.00

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 210 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Anne Marie Pleska		Date of Receipt
Mailing Address 16428 Fox Valley Drive		<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City State Zip Code San Diego CA 92127		Transaction ID : 3566865
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer retired	Occupation none	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. Mr. John P. Poertner		Date of Receipt
Mailing Address 1646 Hillcrest Rd		<input type="text" value="01"/> / <input type="text" value="06"/> / <input type="text" value="2013"/>
City State Zip Code Lawrence KS 66044		Transaction ID : 3552495
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Eunice B. Poethig		Date of Receipt
Mailing Address 1000 E 53rd St Unit 613		<input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
City State Zip Code Chicago IL 60615		Transaction ID : 3558367
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer REQUESTED	Occupation Presbyterian Church USA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1500.00"/>
TOTAL 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: (check only one)	PAGE 211 OF 578
	<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)
EMILY's List

A. Mr. Paul Popenoe
Full Name (Last, First, Middle Initial)

Mailing Address 3979 S Peardale DR

City Lafayette State CA Zip Code 94549

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

Name of Employer RETIRED Occupation N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2013

Transaction ID : 3556575

Amount of Each Receipt this Period
 1500.00

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

Mailing Address 3007 Wessynton Way

City Alexandria State VA Zip Code 22309

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2013

Transaction ID : 3558288

Amount of Each Receipt this Period
 250.00

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

Mailing Address 3300 Darby Rd Apt 6303

City Haverford State PA Zip Code 19041

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

Name of Employer retired Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2013

Transaction ID : 3558257

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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 212 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Brenda Potter
 Full Name (Last, First, Middle Initial)
 Mailing Address 703 North Elm Drive
 City State Zip Code
 Beverly Hills CA 90210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 R.N. REQUESTED
 Receipt For:
 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
 01 / 30 / 2013
Transaction ID : 3569480
 Amount of Each Receipt this Period
 1000.00

B. Ms. Ruth W. Potts
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Woodacres Rd
 City State Zip Code
 Santa Monica CA 90402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED none
 Receipt For:
 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
 01 / 28 / 2013
Transaction ID : 3566928
 Amount of Each Receipt this Period
 1000.00

C. Ms. Mary Jane Powell
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 Cheever Cir.
 City State Zip Code
 Andover MA 1810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3553968
 Amount of Each Receipt this Period
 3500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00
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 213 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Doreen A. Quinn

Mailing Address 569 Evanswood PL

City State Zip Code
Cincinnati OH 45220

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

Name of Employer Occupation
Retired Teacher none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 21 / 2013
Transaction ID : 3562083

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Mrs. Marjorie B. Rachlin

Mailing Address 2919 Brandywine St. NW

City State Zip Code
Washington DC 20008

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

Name of Employer Occupation
retired retired AFL-CIO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 09 / 2013
Transaction ID : 3554490

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. Ms. Judith A. Racoosin

Mailing Address 4506 Rosedale Ave.

City State Zip Code
Bethesda MD 20814

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

Name of Employer Occupation
Physician USFDA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 15 / 2013
Transaction ID : 3556639

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 6250.00

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 214 OF 578
	<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)
EMILY's List

A. Dr. Eric L. Raefsky , M.D.
Full Name (Last, First, Middle Initial)
Mailing Address 6130 South Mount Juliet Road
City Hermitage State TN Zip Code 37076
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation none
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 01 / 16 / 2013
Transaction ID : 3558031
Amount of Each Receipt this Period 1500.00

B. Ms. Lillian Raffel
Full Name (Last, First, Middle Initial)
Mailing Address 601 N Roxbury DR
City Beverly Hills State CA Zip Code 90210
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation none
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 30 / 2013
Transaction ID : 3569792
Amount of Each Receipt this Period 250.00

C. Dr. Janet A. Randall
Full Name (Last, First, Middle Initial)
Mailing Address 862 Jonive Rd.
City Sebastopol State CA Zip Code 95472
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation San Francisco State University
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 28 / 2013
Transaction ID : 3567354
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
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 215 OF 578
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Marilyn Ratliff		Date of Receipt
Mailing Address 41 Romerly Rd.		<input type="text" value="01"/> / <input type="text" value="01"/> / <input type="text" value="2013"/>
City	State	Zip Code
Savannah	GA	31411
FEC ID number of contributing federal political committee.		Transaction ID : 3548831
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Retired	None	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Ellen L. Rautenberg		Date of Receipt
Mailing Address 173 W 78TH St., Apt. 15E		<input type="text" value="01"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
New York	NY	10024
FEC ID number of contributing federal political committee.		Transaction ID : 3553366
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
President and CEO	Public Health Solutions	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mrs. Gena Reed		Date of Receipt
Mailing Address 3428 Ocean Blvd.		<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code
Corona Del Mar	CA	92625
FEC ID number of contributing federal political committee.		Transaction ID : 3563608
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1000.00"/>
TOTAL 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 216 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Louise Reed
 Full Name (Last, First, Middle Initial)
 Mailing Address 1317 Wrenfield Way
 City Villanova State PA Zip Code 19085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 29 / 2013
Transaction ID : 3569198
 Amount of Each Receipt this Period
 500.00

B. Ms. Laurie Reed
 Full Name (Last, First, Middle Initial)
 Mailing Address 334 E. Winchester Rd.
 City Libertyville State IL Zip Code 60048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3559385
 Amount of Each Receipt this Period
 1000.00

C. Ms. Sandra L. Reeves
 Full Name (Last, First, Middle Initial)
 Mailing Address 4899 Montrose Blvd Apt 814
 City Houston State TX Zip Code 77006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation NA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3553883
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
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 217 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Nancy J. Regnier		Date of Receipt MM / DD / YYYY 01 / 07 / 2013 Transaction ID : 3552745
Mailing Address 8 Baylor Dr.		Amount of Each Receipt this Period 250.00
City Longmont	State CO	Zip Code 80503
FEC ID number of contributing federal political committee. C		
Name of Employer Research Assistant	Occupation University of Colorado	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Jackie Reilly		Date of Receipt MM / DD / YYYY 01 / 18 / 2013 Transaction ID : 3559560
Mailing Address 224 Rocking M Rd.		Amount of Each Receipt this Period 250.00
City Kyle	State TX	Zip Code 78640
FEC ID number of contributing federal political committee. C		
Name of Employer Swimming Instructor	Occupation YMCA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Gail D. Reinhart		Date of Receipt MM / DD / YYYY 01 / 28 / 2013 Transaction ID : 3568545
Mailing Address 215 N. Center St., #1407		Amount of Each Receipt this Period 1000.00
City San Antonio	State TX	Zip Code 78202
FEC ID number of contributing federal political committee. C		
Name of Employer Lawyer	Occupation U.S. Government	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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: (check only one)	PAGE 218 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Ira M. Resnick		Date of Receipt M M / D D / Y Y Y Y Y 01 / 31 / 2013 Transaction ID : 3570307
Mailing Address 111 W 67th St Apt 37a Apt. 37A		Amount of Each Receipt this Period 250.00
City New York	State NY	Zip Code 10023
FEC ID number of contributing federal political committee. C		
Name of Employer Art Dealer	Occupation MPA Galler	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Deetta Kay Reynolds		Date of Receipt M M / D D / Y Y Y Y Y 01 / 05 / 2013 Transaction ID : 3551212
Mailing Address 359 Donald Dr		Amount of Each Receipt this Period 250.00
City Moraga	State CA	Zip Code 94556
FEC ID number of contributing federal political committee. C		
Name of Employer professor	Occupation St Mary's College	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Barbara Rice		Date of Receipt M M / D D / Y Y Y Y Y 01 / 19 / 2013 Transaction ID : 3566569
Mailing Address 712 Germantown Pike		Amount of Each Receipt this Period 250.00
City Lafayette Hill	State PA	Zip Code 19444
FEC ID number of contributing federal political committee. C		
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

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: (check only one)	PAGE 219 OF 578
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Barbara Rice
Full Name (Last, First, Middle Initial)

Mailing Address 712 Germantown Pike

City Lafayette Hill	State PA	Zip Code 19444
------------------------	-------------	-------------------

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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	17	/	2013

Transaction ID : 3566570

Amount of Each Receipt this Period
250.00

B. Ms. Louise M. Richardson
Full Name (Last, First, Middle Initial)

Mailing Address 1674 W Bullard Ave

City Fresno	State CA	Zip Code 93711
----------------	-------------	-------------------

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

Name of Employer REQUESTED	Occupation REQUESTED
-------------------------------	-------------------------

Receipt For:
 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
01	/	28	/	2013

Transaction ID : 3568084

Amount of Each Receipt this Period
300.00

C. Ms. Karen Riddle
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 774 or 107 High St
107 High St

City Lake View	State IA	Zip Code 51450
-------------------	-------------	-------------------

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

Name of Employer retired	Occupation none
-----------------------------	--------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	10	/	2013

Transaction ID : 3555389

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	575.00
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 220 OF 578
	<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)
EMILY's List

A. Ms. Karen Riddle
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 774 or 107 High St
107 High St

City Lake View State IA Zip Code 51450

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

Name of Employer retired Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
01 / 06 / 2013
Transaction ID : 3552039

Amount of Each Receipt this Period
100.00

B. Ms. Karen Riddle
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 774 or 107 High St
107 High St

City Lake View State IA Zip Code 51450

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

Name of Employer retired Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
01 / 05 / 2013
Transaction ID : 3551929

Amount of Each Receipt this Period
150.00

C. Ms. Alice Rivlin
Full Name (Last, First, Middle Initial)

Mailing Address 2838 Chesterfield Place NW

City Washington State DC Zip Code 20008

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

Name of Employer economist Occupation Brookings Institution

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
01 / 19 / 2013
Transaction ID : 3560512

Amount of Each Receipt this Period
1000.00

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 221 OF 578
	<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)
EMILY's List

A. Ms. Lynda J. Robb
 Full Name (Last, First, Middle Initial)
 Mailing Address 612 Chain Bridge Rd
 City McLean State VA Zip Code 22101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 25 / 2013
Transaction ID : 3566361
 Amount of Each Receipt this Period
 250.00

B. Ms. Linda Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 512 Edgewood Rd.
 City Pittsburgh State PA Zip Code 15221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PHYSICIAN Occupation UDMC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3567364
 Amount of Each Receipt this Period
 250.00

C. Mr. Clayton Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 1214 7th Ave
 City Houghton State MI Zip Code 49931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 07 / 2013
Transaction ID : 3552761
 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 222 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Jean Robertson
 Full Name (Last, First, Middle Initial)
 Mailing Address 618 E Jennings St.
 City Newburgh State IN Zip Code 47630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Controller Occupation
 Evansville Country Club
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 01 / 21 / 2013
Transaction ID : 3561791
 Amount of Each Receipt this Period
 250.00

B. Ms. Janet E. Robertson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 Pine St.
 City Boulder State CO Zip Code 80302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WRITER Occupation
 Self
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 01 / 09 / 2013
Transaction ID : 3554532
 Amount of Each Receipt this Period
 1000.00

C. Ms. Ellen Rosen Rogoff
 Full Name (Last, First, Middle Initial)
 Mailing Address 70 Merbrook Bend
 City Merion Station State PA Zip Code 19066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Attorney Occupation
 Stradley Ronon Stevens & Young LLP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 01 / 21 / 2013
Transaction ID : 3562389
 Amount of Each Receipt this Period
 250.00

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: (check only one)	PAGE 223 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Brian Rose		Date of Receipt
Mailing Address 3662 Upton ST NW		<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code
Washington	DC	20008
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3554045
Name of Employer	Occupation	Amount of Each Receipt this Period
retired	none	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) B. Mr. Brian Rose		Date of Receipt
Mailing Address 3662 Upton ST NW		<input type="text" value="01"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City	State	Zip Code
Washington	DC	20008
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3565631
Name of Employer	Occupation	Amount of Each Receipt this Period
retired	none	<input type="text" value="200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) C. Deborah Rose		Date of Receipt
Mailing Address 4414 Harbour Town Drive		<input type="text" value="01"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City	State	Zip Code
Beltsville	MD	20705
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3565941
Name of Employer	Occupation	Amount of Each Receipt this Period
Consultant	Epidemiologist	<input type="text" value="2500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2900.00"/>
TOTAL 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: (check only one)	PAGE 224 OF 578
	<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)
EMILY's List

A. Ms. Sylvia Rosenfield
Full Name (Last, First, Middle Initial)

Mailing Address 502 Moorings Circle

City Arnold State MD Zip Code 21012

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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3553819

Amount of Each Receipt this Period
 250.00

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

Mailing Address 2914 33rd Pl. NW

City Washington State DC Zip Code 20008

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

Name of Employer RETIRED Occupation none

Receipt For:
 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
 01 / 31 / 2013
Transaction ID : 3570441

Amount of Each Receipt this Period
 300.00

C. Dr. Roger D. Rossen
Full Name (Last, First, Middle Initial)

Mailing Address 2624 Glen Haven Blvd

City Houston State TX Zip Code 77025

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

Name of Employer Physician Occupation Baylor MD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 04 / 2013
Transaction ID : 3550534

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
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 225 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Amy Y. Rossman
 Full Name (Last, First, Middle Initial)
 Mailing Address 11400 Hennessey Dr.
 City State Zip Code
 Beltsville MD 20705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 scientist USDA
 Receipt For:
 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
 01 / 05 / 2013
Transaction ID : 3553060
 Amount of Each Receipt this Period
 100.00

B. Dr. Amy Y. Rossman
 Full Name (Last, First, Middle Initial)
 Mailing Address 11400 Hennessey Dr.
 City State Zip Code
 Beltsville MD 20705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 scientist USDA
 Receipt For:
 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
 01 / 06 / 2013
Transaction ID : 3552458
 Amount of Each Receipt this Period
 250.00

C. Suzanne Rotondo
 Full Name (Last, First, Middle Initial)
 Mailing Address 501 westview st
 City State Zip Code
 philadelphia PA 19119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Self
 Receipt For:
 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
 01 / 02 / 2013
Transaction ID : 3548875
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 650.00
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 226 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Valerie Rowe		Date of Receipt
Mailing Address 300 Central Park W 29g		<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City State Zip Code New York NY 10024		Transaction ID : 3562809
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1500.00"/>
Name of Employer Professor	Occupation Fordham University	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1500.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Patricia Rubacky		Date of Receipt
Mailing Address 6 Upland Road #A2		<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City State Zip Code Baltimore MD 21210		Transaction ID : 3555772
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer Development Director	Occupation Open Society Institute-Baltimore	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Gail P. Rubin		Date of Receipt
Mailing Address 2 Puritan Ave		<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City State Zip Code Forest Hills NY 11375		Transaction ID : 3563174
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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 227 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Susan Rudin			Date of Receipt
Mailing Address 241 Central Park W Apt 19c			<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : 3554118
New York	NY	10024	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="1000.00"/>
Name of Employer	Occupation		
REQUESTED	REQUESTED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>		

Full Name (Last, First, Middle Initial) B. Ms. Mary B. Ruhl			Date of Receipt
Mailing Address 506 South Bronson Ave			<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : 3562811
Los Angeles	CA	90020	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="1000.00"/>
Name of Employer	Occupation		
retired attorney	Latham & Watkins		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>		

Full Name (Last, First, Middle Initial) C. Ms. Lydia Ruyle			Date of Receipt
Mailing Address 2101 24th Street			<input type="text" value="01"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : 3559626
Greeley	CO	80631	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="250.00"/>
Name of Employer	Occupation		
artist	self		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 228 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kathryn Warnecke Ryan		Date of Receipt
Mailing Address 819 Siesta Cove		<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City Lexington	State KY	Zip Code 40502
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 3555888
Name of Employer Attorney		Amount of Each Receipt this Period
Occupation Kathryn Warnecke Ryan PLLC		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="250.00"/>		

Full Name (Last, First, Middle Initial) B. Ms. Paula L. W. Sabloff		Date of Receipt
Mailing Address 321 Calle Loma Norte		<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City Santa Fe	State NM	Zip Code 87501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 3563875
Name of Employer professor		Amount of Each Receipt this Period
Occupation Santa Fe Institute		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="250.00"/>		

Full Name (Last, First, Middle Initial) C. Ms. Nancy R. Sachs		Date of Receipt
Mailing Address 32 Dromara Rd.		<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City Saint Louis	State MO	Zip Code 63124
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 3563995
Name of Employer Gallery Owner		Amount of Each Receipt this Period
Occupation Self Employed		<input type="text" value="1000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="1000.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1500.00"/>
TOTAL 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 229 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Jane M. Saks
 Full Name (Last, First, Middle Initial)
 Mailing Address 2610 N Sawyer Ave
 City Chicago State IL Zip Code 60647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 16 / 2013
Transaction ID : 3556404
 Amount of Each Receipt this Period
 500.00

B. Virginia Sall
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 Vineyard Lane
 City Cary State NC Zip Code 27513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer homemaker Occupation self
 Receipt For: 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
 01 / 19 / 2013
Transaction ID : 3560606
 Amount of Each Receipt this Period
 1000.00

C. Ms. Jean Sampson
 Full Name (Last, First, Middle Initial)
 Mailing Address 744 Oak Street
 City Winnetka State IL Zip Code 60093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer housewife Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2013
Transaction ID : 3556577
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
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 230 OF 578
	<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)
EMILY's List

A. Dr. Mary H. Samuels , M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2010 York Road
 The Manor at York Town
 City Jamison State PA Zip Code 18929
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: 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
 01 / 22 / 2013
Transaction ID : 3563584
 Amount of Each Receipt this Period
 300.00

B. Ms. Isabel M. Sam-Vargas
 Full Name (Last, First, Middle Initial)
 Mailing Address 275 Beacon Street
 City San Francisco State CA Zip Code 94131
 Name of Employer retired Occupation none
 Receipt For: 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
 01 / 30 / 2013
Transaction ID : 3569485
 Amount of Each Receipt this Period
 1000.00

C. Mr. Robert P. Sands
 Full Name (Last, First, Middle Initial)
 Mailing Address 6675 Tepee Ridge Rd W
 City Bozeman State MT Zip Code 59715
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3568056
 Amount of Each Receipt this Period
 250.00

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: (check only one)	PAGE 231 OF 578
	<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)
EMILY's List

A. Dr. Margaret H. Schadler , Ph.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 4024 Windsor Drive
 City Niskayuna State NY Zip Code 12309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation none
 Receipt For: 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
 01 / 15 / 2013
Transaction ID : 3556592
 Amount of Each Receipt this Period
 1000.00

B. Dr. Helen S. Schaefer
 Full Name (Last, First, Middle Initial)
 Mailing Address 11701 E Andalusian Pl
 City Tucson State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired educator Occupation n/a
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554440
 Amount of Each Receipt this Period
 250.00

C. Dr. Helen S. Schaefer
 Full Name (Last, First, Middle Initial)
 Mailing Address 11701 E Andalusian Pl
 City Tucson State AZ Zip Code 85748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired educator Occupation n/a
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 26 / 2013
Transaction ID : 3566628
 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 232 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Grace B. Schaible
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 61560
 City Fairbanks State AK Zip Code 99706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 07 / 2013
Transaction ID : 3552759
 Amount of Each Receipt this Period
 1000.00

B. Ms. Alice Coleman Schelling
 Full Name (Last, First, Middle Initial)
 Mailing Address 4506 Wetherill Rd
 City Bethesda State MD Zip Code 20816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer home Occupation home
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 05 / 2013
Transaction ID : 3551453
 Amount of Each Receipt this Period
 250.00

C. Ms. Janet B. Scher
 Full Name (Last, First, Middle Initial)
 Mailing Address 1050 West Cross St
 City Lakewood State NJ Zip Code 8701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3562764
 Amount of Each Receipt this Period
 250.00

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: (check only one)	PAGE 233 OF 578
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Lois J. Schiffer
Full Name (Last, First, Middle Initial)

Mailing Address 4640 Brandywine St NW

City Washington State DC Zip Code 20016

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

Name of Employer REQUESTED Occupation NOAA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : 3558271

Amount of Each Receipt this Period
 250.00

B. Ms. Lisette A Schmidli
Full Name (Last, First, Middle Initial)

Mailing Address 3656 Ranch Creek

City Austin State TX Zip Code 78730

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 ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 25 / 2013
Transaction ID : 3566616

Amount of Each Receipt this Period
 1000.00

C. Dr. Suzanne Schmidt
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1600

City Cloudcroft State NM Zip Code 88317

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

Name of Employer Counselor Occupation Self Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3567430

Amount of Each Receipt this Period
 250.00

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 234 OF 578
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Gail S. Schoettler		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 25 / 2013 Transaction ID : 3566176
Mailing Address 11855 E. Daley Circle		Amount of Each Receipt this Period 1000.00
City Parker	State CO	Zip Code 80134
FEC ID number of contributing federal political committee. C		
Name of Employer Doctor	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Phyllis Schreiber		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 11 / 2013 Transaction ID : 3554823
Mailing Address 200 W Washington Sq Apt 1908		Amount of Each Receipt this Period 250.00
City Philadelphia	State PA	Zip Code 19106
FEC ID number of contributing federal political committee. C		
Name of Employer Jewelry artist	Occupation Self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Dr. Jane G. Schubert		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 03 / 2013 Transaction ID : 3550256
Mailing Address 1535 44TH ST NW		Amount of Each Receipt this Period 1000.00
City Washington	State DC	Zip Code 20007
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 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: (check only one)	PAGE 235 OF 578
	<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)
EMILY's List

A. Mrs. Linda Schulein
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Linda Isle
 City Newport Beach State CA Zip Code 92660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 01 / 07 / 2013
Transaction ID : 3573351
 Amount of Each Receipt this Period
 500.00

B. Ms. Bette L. Schultz
 Full Name (Last, First, Middle Initial)
 Mailing Address 67 Candace Lane
 City Chatham State NJ Zip Code 7928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CONSULTANT Occupation Self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 01 / 15 / 2013
Transaction ID : 3556579
 Amount of Each Receipt this Period
 1000.00

C. Mr. W. Ford Schumann
 Full Name (Last, First, Middle Initial)
 Mailing Address 9612 E. Vereda Solana
 City Scottsdale State AZ Zip Code 85255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation None
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 01 / 28 / 2013
Transaction ID : 3566914
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 236 OF 578
	<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)
EMILY's List

A. Ms. Suzanne E. Schwartz
 Full Name (Last, First, Middle Initial)
 Mailing Address 137 S Newport Way
 City Dagsboro State DE Zip Code 19939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired none
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 19 / 2013
Transaction ID : 3560497
 Amount of Each Receipt this Period
 250.00

B. Ms. Renata Manasse Schwebel
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Dogwood Hills
 City Pound Ridge State NY Zip Code 10576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SCULPTOR Self Employed
 Receipt For:
 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
 01 / 31 / 2013
Transaction ID : 3570280
 Amount of Each Receipt this Period
 1000.00

C. Ms. Michelle P. Scott
 Full Name (Last, First, Middle Initial)
 Mailing Address 160 East 38th St. #26c
 City New York State NY Zip Code 10016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 attorney FAIR Health, Inc.
 Receipt For:
 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
 01 / 16 / 2013
Transaction ID : 3555623
 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 237 OF 578
	(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)
EMILY's List

A. Ms. Laura J. Scott
Full Name (Last, First, Middle Initial)
Mailing Address 1031 Forest Lakes Drive

City Naples	State FL	Zip Code 34105
----------------	-------------	-------------------

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

Name of Employer retired	Occupation none
-----------------------------	--------------------

Receipt For:
 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
 01 / 24 / 2013
Transaction ID : 3565342

Amount of Each Receipt this Period
1000.00

B. Ms. Jean Seiden
Full Name (Last, First, Middle Initial)
Mailing Address 11100 Rosemont Dr.

City North Bethesda Md	State MD	Zip Code 20852
---------------------------	-------------	-------------------

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

Name of Employer Interior Designer	Occupation Spectra Design Group Ltd.
---------------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : 3550257

Amount of Each Receipt this Period
500.00

C. Ms. Ellen Seidman
Full Name (Last, First, Middle Initial)
Mailing Address 2558 36th Street, NW

City Washington	State DC	Zip Code 20007
--------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation none
-----------------------------	--------------------

Receipt For:
 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
 01 / 15 / 2013
Transaction ID : 3556582

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 238 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Elizabeth Margaret Seifel		Date of Receipt
Mailing Address 290 Amber Dr.		<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City State Zip Code San Francisco CA 94131		Transaction ID : 3568093
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. Mr. Karl Seifert		Date of Receipt
Mailing Address 4618 Dover Dr		<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City State Zip Code Ames IA 50014		Transaction ID : 3568780
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. Mrs. Barbara B Seiler		Date of Receipt
Mailing Address 119 Laurel Hollow Way		<input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City State Zip Code Saluda NC 28773		Transaction ID : 3560629
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1500.00"/>
TOTAL 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: (check only one)	PAGE 239 OF 578
	<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)
EMILY's List

A. Mary Ellyn Sensenbrenner
Full Name (Last, First, Middle Initial)
Mailing Address 818 Prospect Place

City Madison	State WI	Zip Code 53703
-----------------	-------------	-------------------

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

Name of Employer Retired	Occupation none
-----------------------------	--------------------

Receipt For:
 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
01	/	05	/	2013

Transaction ID : 3551533

Amount of Each Receipt this Period
150.00

B. Mary Ellyn Sensenbrenner
Full Name (Last, First, Middle Initial)
Mailing Address 818 Prospect Place

City Madison	State WI	Zip Code 53703
-----------------	-------------	-------------------

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

Name of Employer Retired	Occupation none
-----------------------------	--------------------

Receipt For:
 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
01	/	30	/	2013

Transaction ID : 3569545

Amount of Each Receipt this Period
250.00

C. Dr. Donna E. Shalala
Full Name (Last, First, Middle Initial)
Mailing Address 11355 Four Pillies Rd

City Miami	State FL	Zip Code 33156
---------------	-------------	-------------------

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

Name of Employer President	Occupation University Of Miami
-------------------------------	-----------------------------------

Receipt For:
 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
01	/	14	/	2013

Transaction ID : 3556418

Amount of Each Receipt this Period
1000.00

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 240 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Patricia F. Shanks
 Full Name (Last, First, Middle Initial)
 Mailing Address 783 contra costa avenue
 City Berkeley State CA Zip Code 94707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2013
Transaction ID : 3555440
 Amount of Each Receipt this Period
 250.00

B. Ms. Sarene P. Shanus
 Full Name (Last, First, Middle Initial)
 Mailing Address 347 Orienta Avenue
 City Mamaroneck State NY Zip Code 10543
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Manager Occupation Harlorn, LLC
 Receipt For: 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
 01 / 09 / 2013
Transaction ID : 3554698
 Amount of Each Receipt this Period
 1000.00

C. Christina Sharon
 Full Name (Last, First, Middle Initial)
 Mailing Address 345 Ayr Hill Avenue, NE
 City Vienna State VA Zip Code 22180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HOMEMAKER Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 21 / 2013
Transaction ID : 3562240
 Amount of Each Receipt this Period
 250.00

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 241 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Margaret P. Sharp
 Full Name (Last, First, Middle Initial)
 Mailing Address 1218 Knollwood Place
 City Martinsville State VA Zip Code 24112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Teacher Occupation Carlisle School
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 16 / 2013
Transaction ID : 3555795
 Amount of Each Receipt this Period
 250.00

B. Ms. Mary Frances Shaughnessy
 Full Name (Last, First, Middle Initial)
 Mailing Address 357 Spillway Rd.
 City West Hurley State NY Zip Code 12491
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Real Estate Executiv Occupation Tudor Realty Services Corp.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3568085
 Amount of Each Receipt this Period
 300.00

C. Ms. Peg Shaw
 Full Name (Last, First, Middle Initial)
 Mailing Address 2147 O St NW Apt 306
 City Washington State DC Zip Code 20037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lawyer Occupation Self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 30 / 2013
Transaction ID : 3569486
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00
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 242 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Sarah Sheafor
 Full Name (Last, First, Middle Initial)
 Mailing Address 7501 Walton Ln
 City Annandale State VA Zip Code 22003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer VETERINARIAN Occupation VCA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3568055
 Amount of Each Receipt this Period
 250.00

B. Ms. Margaret V. Sheehan
 Full Name (Last, First, Middle Initial)
 Mailing Address 66 Rico Way
 City San Francisco State CA Zip Code 94123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : 3558192
 Amount of Each Receipt this Period
 500.00

C. Andrea Shepard
 Full Name (Last, First, Middle Initial)
 Mailing Address 838 Diamond St
 City San Francisco State CA Zip Code 94114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer economist Occupation Cornerstone Research
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 07 / 2013
Transaction ID : 3553445
 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 243 OF 578
	<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)
EMILY's List

A. Mr. Frank W. Sheppard , Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 1403 Angelina Circle

City College Station	State TX	Zip Code 77840
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Date of Receipt
01 / 30 / 2013
Transaction ID : 3569707

Amount of Each Receipt this Period
750.00

B. Ms. Kitty P. Sherwin
Full Name (Last, First, Middle Initial)
Mailing Address 1108 Anderson St.

City Durham	State NC	Zip Code 27705
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
01 / 28 / 2013
Transaction ID : 3568784

Amount of Each Receipt this Period
250.00

C. Ms. Linda J. Shoemaker
Full Name (Last, First, Middle Initial)
Mailing Address 45 Bellevue Dr

City Boulder	State CO	Zip Code 80302
FEC ID number of contributing federal political committee. C		
Name of Employer President	Occupation Brett Family Foundation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Date of Receipt
01 / 05 / 2013
Transaction ID : 3551446

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
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 244 OF 578
	<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)
EMILY's List

A. Mr. Clyde E. Shorey , Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 3033 W Lane Kys NW
 City Washington State DC Zip Code 20007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation none
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2013
Transaction ID : 3556593
 Amount of Each Receipt this Period
 1000.00

B. Ms. Terri K. Shuck
 Full Name (Last, First, Middle Initial)
 Mailing Address 8026 Glenside Drive
 City Takoma Park State MD Zip Code 20912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Development Director Occupation Campaign for America's Future
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3558493
 Amount of Each Receipt this Period
 250.00

C. Ms. Rachel J. Siegel
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Savage Farm Dr
 City Ithaca State NY Zip Code 14850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retirred Occupation self
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 05 / 2013
Transaction ID : 3551281
 Amount of Each Receipt this Period
 250.00

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 245 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Katherine A. Siggerud
 Full Name (Last, First, Middle Initial)
 Mailing Address 4682 20th PI N
 City Arlington State VA Zip Code 22207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer manager Occupation federal government
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 04 / 2013
Transaction ID : 3550326
 Amount of Each Receipt this Period
 250.00

B. Mrs. Lila Silverman
 Full Name (Last, First, Middle Initial)
 Mailing Address 4054 Cranbrook Court
 City Bloomfield Hills State MI Zip Code 48301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer homemaker Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1075.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 20 / 2013
Transaction ID : 3560830
 Amount of Each Receipt this Period
 75.00

C. Dr. Gail Silverman
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 Island Avenue Apt 1814
 City Miami Beach State FL Zip Code 33139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired psychotherapist Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2013
Transaction ID : 3556571
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 575.00
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 246 OF 578
	<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)
EMILY's List

A. Mrs. Lila Silverman
Full Name (Last, First, Middle Initial)

Mailing Address 4054 Cranbrook Court

City Bloomfield Hills State MI Zip Code 48301

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

Name of Employer homemaker Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1075.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 05 / 2013
Transaction ID : 3550600

Amount of Each Receipt this Period
 1000.00

B. Ms. Hildy Simmons
Full Name (Last, First, Middle Initial)

Mailing Address 51 Sidney Pl

City Brooklyn State NY Zip Code 11201

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

Name of Employer CONSULTANT Occupation SELF

Receipt For:
 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
 01 / 29 / 2013
Transaction ID : 3569197

Amount of Each Receipt this Period
 300.00

C. Terri E. Simon
Full Name (Last, First, Middle Initial)

Mailing Address 103 Greenacres Ave

City Scarsdale State NY Zip Code 10583

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 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
 01 / 22 / 2013
Transaction ID : 3563593

Amount of Each Receipt this Period
 300.00

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 247 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Nancy Sinatra
 Full Name (Last, First, Middle Initial)
 Mailing Address 8571 W Olympic Blvd
 City Los Angeles State CA Zip Code 90035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer entertainer Occupation self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554443
 Amount of Each Receipt this Period
 500.00

B. Hon. Adelaide A. Sink
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 219
 City Thonotosassa State FL Zip Code 33592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer social worker Occupation retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 02 / 2013
Transaction ID : 3550028
 Amount of Each Receipt this Period
 2500.00

C. Hon. Adelaide A. Sink
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 219
 City Thonotosassa State FL Zip Code 33592
 FEC ID number of contributing federal political committee. **C**
 Name of Employer social worker Occupation retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554152
 Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00
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 248 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Patricia E. Sklar
 Full Name (Last, First, Middle Initial)
 Mailing Address 2704 W. Morse Avenue
 City Chicago State IL Zip Code 60645
 Date of Receipt 01 / 18 / 2013
Transaction ID : 3569992
 Amount of Each Receipt this Period 350.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Recruiter Occupation sklar & Associates
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 350.00

B. Mrs. Jane A. Slack
 Full Name (Last, First, Middle Initial)
 Mailing Address 7247 San Luis St
 City Carlsbad State CA Zip Code 92011
 Date of Receipt 01 / 13 / 2013
Transaction ID : 3555109
 Amount of Each Receipt this Period 500.00
 FEC ID number of contributing federal political committee. C
 Name of Employer retired Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 500.00

C. Martin Small
 Full Name (Last, First, Middle Initial)
 Mailing Address 856 Chile Ct
 City Las Cruces State NM Zip Code 88001
 Date of Receipt 01 / 05 / 2013
Transaction ID : 3551516
 Amount of Each Receipt this Period 500.00
 FEC ID number of contributing federal political committee. C
 Name of Employer President/CEO/CTO (Electronics Enginee Occupation CALCULEX, Inc.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 500.00

SUBTOTAL of Receipts This Page (optional).....▶ 1350.00
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 249 OF 578
	<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)
EMILY's List

A. Ms. Jean P. Sman
Full Name (Last, First, Middle Initial)
Mailing Address 11191 sw 60 ave
City Pinecrest State FL Zip Code 33156
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Writer Self
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 05 / 2013
Transaction ID : 3551249
Amount of Each Receipt this Period
250.00

B. Mrs. Laura W. Smith
Full Name (Last, First, Middle Initial)
Mailing Address 2919 Gulf Shore Blvd. North, #103
City Naples State FL Zip Code 34103
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Retired None
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 11 / 2013
Transaction ID : 3554867
Amount of Each Receipt this Period
250.00

C. Ms. Linda L. Smith
Full Name (Last, First, Middle Initial)
Mailing Address 1220 Hemlock St NW
City Washington State DC Zip Code 20012
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Professor Univ. of Maryland
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 21 / 2013
Transaction ID : 3562396
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: (check only one)	PAGE 250 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Mr. Harlan Smith		Date of Receipt M M / D D / Y Y Y Y Y 01 / 22 / 2013 Transaction ID : 3562807
Mailing Address 1706 Ryan Ave. W		Amount of Each Receipt this Period 1000.00
City Roseville	State MN	Zip Code 55113
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Dr. Patricia J. Smith		Date of Receipt M M / D D / Y Y Y Y Y 01 / 07 / 2013 Transaction ID : 3552757
Mailing Address P.O. Box 2049		Amount of Each Receipt this Period 1000.00
City Ocean Shores	State WA	Zip Code 98569
FEC ID number of contributing federal political committee. C		
Name of Employer WRITER	Occupation Self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Ms. Amanda J. Smith		Date of Receipt M M / D D / Y Y Y Y Y 01 / 21 / 2013 Transaction ID : 3562290
Mailing Address 103 West Main Street #302/402		Amount of Each Receipt this Period 1000.00
City Durham	State NC	Zip Code 27701
FEC ID number of contributing federal political committee. C		
Name of Employer retired	Occupation self employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 251 OF 578
	<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)
EMILY's List

A. Ms. Kathryn Smith
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 7358

City Little Rock State AR Zip Code 72217

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

Name of Employer RETIRED Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 21 / 2013
Transaction ID : 3562080

Amount of Each Receipt this Period
 1000.00

B. Ms. Cindy Smith
Full Name (Last, First, Middle Initial)

Mailing Address 1720 Maple Ave Apt 2610

City Evanston State IL Zip Code 60201

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

Name of Employer RETIRED Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3569998

Amount of Each Receipt this Period
 1000.00

C. Ms. Barbara Smith-Thomas
Full Name (Last, First, Middle Initial)

Mailing Address 4106 SE Lincoln St., Apt. 121

City Portland State OR Zip Code 97214

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

Name of Employer RETIRED Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3563164

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: PAGE 252 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Anne C. Snyder
 Full Name (Last, First, Middle Initial)
 Mailing Address 12574 Chicken Mountain RD
 City Orange State VA Zip Code 22960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : 3558081
 Amount of Each Receipt this Period
 250.00

B. Ms. Catharine Soros
 Full Name (Last, First, Middle Initial)
 Mailing Address 8433 Harold Way
 City Los Angeles State CA Zip Code 90069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer homemaker Occupation n/a
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : 3570559
 Amount of Each Receipt this Period
 500.00

C. Neil Sosland
 Full Name (Last, First, Middle Initial)
 Mailing Address 4800 Main St. #100
 City Kansas City State MO Zip Code 64112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Sosland Publishing Co
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3559469
 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 253 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Christine Speiser

Mailing Address 135 S Kensington Ave.

City State Zip Code
La Grange IL 60525

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 28 / 2013
Transaction ID : 3568094

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Ms. Barbara Spencer

Mailing Address 736 3rd Ave

City State Zip Code
San Francisco CA 94118

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

Name of Employer Occupation
Retired None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 01 / 2013
Transaction ID : 3548748

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Ms. Mary Gabrielle Sprague

Mailing Address 5708 33rd St., NW

City State Zip Code
Washington DC 20015

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

Name of Employer Occupation
Attorney U.S. Dept. of Justice

Receipt For:
 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
01 / 08 / 2013
Transaction ID : 3554222

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

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 254 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jean Stallings			Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 22 / 2013 Transaction ID : 3561563		
Mailing Address 651 sinex Ave #L-116			Amount of Each Receipt this Period 250.00		
City Pacific Grove	State CA	Zip Code 93950			
FEC ID number of contributing federal political committee. C					
Name of Employer REQUESTED		Occupation REQUESTED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

Full Name (Last, First, Middle Initial) B. Ms. Barbara Stampfl			Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 15 / 2013 Transaction ID : 3555862		
Mailing Address 2435 Jonila Avenue			Amount of Each Receipt this Period 1500.00		
City Lakeland	State FL	Zip Code 33803			
FEC ID number of contributing federal political committee. C					
Name of Employer Librarian		Occupation Bartow Public Library			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00			

Full Name (Last, First, Middle Initial) C. Ms. Janet Stein			Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 28 / 2013 Transaction ID : 3568099		
Mailing Address 525 SE 16th Ave			Amount of Each Receipt this Period 500.00		
City Portland	State OR	Zip Code 97214			
FEC ID number of contributing federal political committee. C					
Name of Employer NURSE PRACTIONER		Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
TOTAL This Period (last page this line number only).....▶	2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 255 OF 578
	<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)
EMILY's List

A. Ms. Janet Stein
Full Name (Last, First, Middle Initial)

Mailing Address 525 SE 16th Ave

City Portland State OR Zip Code 97214

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

Name of Employer Occupation
NURSE PRACTIONER Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
01 / 29 / 2013
Transaction ID : 3568501

Amount of Each Receipt this Period
500.00

B. Dr. Peter Steinglass
Full Name (Last, First, Middle Initial)

Mailing Address 42 W 15th St Apt 8

City New York State NY Zip Code 10011

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

Name of Employer Occupation
PSYCHIATRIST Self

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
01 / 24 / 2013
Transaction ID : 3565432

Amount of Each Receipt this Period
250.00

C. Ms. Marion P. Steininger
Full Name (Last, First, Middle Initial)

Mailing Address 1070 Pendleton Ct.

City Voorhees State NJ Zip Code 8043

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

Name of Employer Occupation
Retired None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
01 / 21 / 2013
Transaction ID : 3562081

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00

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 256 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jane Stephens		Date of Receipt M M / D D / Y Y Y Y Y 01 / 22 / 2013 Transaction ID : 3563118
Mailing Address 641 Feature DR Apt 129		Amount of Each Receipt this Period 250.00
City Sacramento	State CA	Zip Code 95825
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Anna Stephenson		Date of Receipt M M / D D / Y Y Y Y Y 01 / 01 / 2013 Transaction ID : 3548790
Mailing Address 8345 NW 66th Street #4361		Amount of Each Receipt this Period 350.00
City Miami	State FL	Zip Code 33166
FEC ID number of contributing federal political committee. C		
Name of Employer Executive	Occupation Self-employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Ms. Virginia Stern		Date of Receipt M M / D D / Y Y Y Y Y 01 / 20 / 2013 Transaction ID : 3561665
Mailing Address 297 Market Lane		Amount of Each Receipt this Period 350.00
City Clinton Corners	State NY	Zip Code 12514
FEC ID number of contributing federal political committee. C		
Name of Employer Town Supervisor	Occupation Town of Stanford, NY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	950.00
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 257 OF 578
	<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)
EMILY's List

A. Mrs. Lorna A. Stern
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 84

City Mercer Island State WA Zip Code 98040

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

Name of Employer President Occupation Pioneer Van Lines, Inc.

Receipt For:
 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
 01 / 06 / 2013

Transaction ID : 3551573

Amount of Each Receipt this Period
 1000.00

B. Ms. Jane Watson Stetson
Full Name (Last, First, Middle Initial)

Mailing Address 139 Elm Street

City Norwich State VT Zip Code 5055

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

Name of Employer Finance Chair DNC Occupation Self

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 14 / 2013

Transaction ID : 3555459

Amount of Each Receipt this Period
 5000.00

C. Ms. Dolores S. Stickler
Full Name (Last, First, Middle Initial)

Mailing Address 2323 Pittston Ave.

City Scranton State PA Zip Code 18505

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

Name of Employer RETIRED Occupation none

Receipt For:
 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
 01 / 22 / 2013

Transaction ID : 3562821

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
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 258 OF 578
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Judith Stiehm		Date of Receipt
Mailing Address 434 24th		<input type="text" value="01"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
Santa Monica	CA	90402
FEC ID number of contributing federal political committee.		Transaction ID : 3552756
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
PROFESSOR	FIU	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Ian E. Stockdale		Date of Receipt
Mailing Address 601 Forest Ave		<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
Palo Alto	CA	94301
FEC ID number of contributing federal political committee.		Transaction ID : 3568061
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="335.00"/>
Name of Employer	Occupation	
ENGINEERING MANAGER	Altair	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="335.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Catherine Stoker		Date of Receipt
Mailing Address 6979 Hidden Ridge Dr.		<input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City	State	Zip Code
West Chester	OH	45069
FEC ID number of contributing federal political committee.		Transaction ID : 3566359
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>
Name of Employer	Occupation	
Business Owner	Brite Belt Technologies	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1135.00"/>
TOTAL 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: (check only one)	PAGE 259 OF 578
	<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)
EMILY's List

A. Ms. Sybil W. Stoller
Full Name (Last, First, Middle Initial)

Mailing Address 1100 Rivas Canyon Road

City Pacific Palisades State CA Zip Code 90272

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

Name of Employer none Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 05 / 2013
Transaction ID : 3550827

Amount of Each Receipt this Period
 1000.00

B. Ms. Sybil W. Stoller
Full Name (Last, First, Middle Initial)

Mailing Address 1100 Rivas Canyon Road

City Pacific Palisades State CA Zip Code 90272

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

Name of Employer none Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 07 / 2013
Transaction ID : 3552294

Amount of Each Receipt this Period
 1000.00

C. Ms. Norma K. Stone
Full Name (Last, First, Middle Initial)

Mailing Address 3601 Turtle Creek Blvd.
Apt. 404

City Dallas State TX Zip Code 75219

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

Name of Employer retired Occupation none

Receipt For:
 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
 01 / 03 / 2013
Transaction ID : 3552754

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER: PAGE 260 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. Rainer Storb

Mailing Address 2330 43RD Ave E Apt 100B
D1-100

City State Zip Code
Seattle WA 98112

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

Name of Employer Occupation
Scientist F Hutchison Cancer Research Ctr

Receipt For:
 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
 01 / 28 / 2013
Transaction ID : 3569195

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. Ms. Diana Strassmann

Mailing Address 233 S Wacker Dr. 10th Floor

City State Zip Code
Chicago IL 60606

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

Name of Employer Occupation
Professor Rice University

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2013
Transaction ID : 3569932

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. Mr. Steven Strauss

Mailing Address 3001 Veazey Ter. NW, Apt. 1332
Apt. 1332

City State Zip Code
Washington DC 20008

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

Name of Employer Occupation
TRANS POLICY ANALYST DC DOT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3553965

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5550.00

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 261 OF 578
	<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)
EMILY's List

A. Mr. Robert A. Strauss
Full Name (Last, First, Middle Initial)

Mailing Address 1611 North Wilmot
Suite 108A

City Tucson State AZ Zip Code 85712

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

Name of Employer RETIRED Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
01 / 28 / 2013
Transaction ID : 3566929

Amount of Each Receipt this Period
1000.00

B. Ms. Nellie B. Strickland
Full Name (Last, First, Middle Initial)

Mailing Address 203 Yoakum Pkwy., Apt. 614

City Alexandria State VA Zip Code 22304

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
01 / 28 / 2013
Transaction ID : 3568075

Amount of Each Receipt this Period
300.00

C. Ms. Beatrice Strong
Full Name (Last, First, Middle Initial)

Mailing Address 3626 E. Highland Avenue

City Phoenix State AZ Zip Code 85018

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
01 / 29 / 2013
Transaction ID : 3568766

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1800.00

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 262 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Lucy B. Stroock
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 Frost St.
 City Cambridge State MA Zip Code 2140
 Date of Receipt 01 / 16 / 2013
Transaction ID : 3558044
 Amount of Each Receipt this Period 1000.00
 Aggregate Year-to-Date 1000.00
 Name of Employer Retired Teacher Occupation none
 Receipt For: Primary General Other (specify)

B. Ms. Patricia Te Sturdevant
 Full Name (Last, First, Middle Initial)
 Mailing Address 1836 8th Avenue
 City Sacramento State CA Zip Code 95818
 Date of Receipt 01 / 19 / 2013
Transaction ID : 3561448
 Amount of Each Receipt this Period 1000.00
 Aggregate Year-to-Date 1000.00
 Name of Employer Lawyer Occupation State of California,, Dept of Insuranc
 Receipt For: Primary General Other (specify)

C. Ms. Susan C Styn
 Full Name (Last, First, Middle Initial)
 Mailing Address 3268 Governor Dr #301
 City San Diego State CA Zip Code 92122
 Date of Receipt 01 / 24 / 2013
Transaction ID : 3565883
 Amount of Each Receipt this Period 250.00
 Aggregate Year-to-Date 250.00
 Name of Employer retired Occupation n/a
 Receipt For: Primary General Other (specify)

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 263 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Jennifer Sulla		Date of Receipt
Mailing Address 17 Munroe Street		<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City Newton	State MA	Zip Code 2460
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 3562342
Name of Employer attorney		Amount of Each Receipt this Period
Occupation Mintz Levin		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="250.00"/>		

Full Name (Last, First, Middle Initial) B. Ms. Shirley Summerfield		Date of Receipt
Mailing Address 736 Pasadena Ave		<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City Niagara Falls	State NY	Zip Code 14304
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 3568743
Name of Employer REQUESTED		Amount of Each Receipt this Period
Occupation REQUESTED		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="250.00"/>		

Full Name (Last, First, Middle Initial) C. Mr. Thomas Swift		Date of Receipt
Mailing Address 5308 Shepard Ave		<input type="text" value="01"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City Sacramento	State CA	Zip Code 95819
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 3550705
Name of Employer retired none		Amount of Each Receipt this Period
Occupation none		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="250.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="750.00"/>
TOTAL 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: (check only one)	PAGE 264 OF 578
	<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)
EMILY's List

A. Ms. Eleanor Swift
Full Name (Last, First, Middle Initial)
Mailing Address 2959 Piedmont Avenue
City Berkeley State CA Zip Code 94705
FEC ID number of contributing federal political committee. **C**
Name of Employer PROFESSOR Occupation Univ of California
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 02 / 2013
Transaction ID : 3550237
Amount of Each Receipt this Period
250.00

B. Ms. Ruth B. Talley
Full Name (Last, First, Middle Initial)
Mailing Address 1302 Anglers Ln
City Lutz State FL Zip Code 33548
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation REQUESTED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2013
Transaction ID : 3561564
Amount of Each Receipt this Period
250.00

C. Ms. Jill Tane
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 193
City Quechee State VT Zip Code 5059
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 ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 15 / 2013
Transaction ID : 3555556
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 265 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Jennifer Taw
 Full Name (Last, First, Middle Initial)
 Mailing Address 1852 West Dr.
 City San Marino State CA Zip Code 91108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer professor Occupation Claremont McKenna College
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3563890
 Amount of Each Receipt this Period
 250.00

B. Elizabeth L. Terrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 2424 Tignor Road
 City Richmond State VA Zip Code 23224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : 3550254
 Amount of Each Receipt this Period
 300.00

C. Ms. Myra Terry
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Wilson Rd Apt 92
 City Springfield State NJ Zip Code 7081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation N/A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 19 / 2013
Transaction ID : 3560312
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 800.00
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 266 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Joyce M. E. Thibodeaux
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 Oakdale Loop
 City Houma State LA Zip Code 70360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3569999
 Amount of Each Receipt this Period
 500.00

B. Mrs. Patricia Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 3450 Church School Road
 City Doylestown State PA Zip Code 18902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation N/A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2013
Transaction ID : 3556578
 Amount of Each Receipt this Period
 1000.00

C. Dana Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 1627 K Street NW
 12th Floor
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Senior Policy Director Occupation National Family Planning & Reproductiv
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 09 / 2013
Transaction ID : 3554622
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 267 OF 578
	<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)
EMILY's List

A. Ms. Sara J. Thompson
Full Name (Last, First, Middle Initial)

Mailing Address 50 Mission Dr.

City New Braunfels State TX Zip Code 78130

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 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
 01 / 07 / 2013

Transaction ID : 3552549

Amount of Each Receipt this Period
 300.00

B. Mr. Curtis E. Thomsen
Full Name (Last, First, Middle Initial)

Mailing Address 1919 Chestnut Street
Apartment 909

City Philadelphia State PA Zip Code 19103

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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 25 / 2013

Transaction ID : 3566442

Amount of Each Receipt this Period
 250.00

C. Ms. Judith Z. Thorne
Full Name (Last, First, Middle Initial)

Mailing Address 11930 Escalante Court

City Reston State VA Zip Code 20191

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

Name of Employer RETIRED Occupation N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 07 / 2013

Transaction ID : 3552748

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	800.00
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 268 OF 578
	<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)
EMILY's List

A. Mrs. Katherine R. Thorpe
 Full Name (Last, First, Middle Initial)
 Mailing Address 725 9th Ave Apt 1008
 City Seattle State WA Zip Code 98104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: 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
 01 / 22 / 2013
Transaction ID : 3563589
 Amount of Each Receipt this Period
 300.00

B. Ms. Karline K. Tierney
 Full Name (Last, First, Middle Initial)
 Mailing Address 717 Maiden Choice Ln. Apt. T03
 City Catonsville State MD Zip Code 21228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation none
 Receipt For: 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
 01 / 16 / 2013
Transaction ID : 3558040
 Amount of Each Receipt this Period
 1000.00

C. Ms. Maria R. Tindall
 Full Name (Last, First, Middle Initial)
 Mailing Address 627 Catalina Dr.
 City Livermore State CA Zip Code 94550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation none
 Receipt For: 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
 01 / 21 / 2013
Transaction ID : 3562084
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	2300.00
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 269 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Elizabeth Beidler Tisdahl
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Martha Ln.
 City Evanston State IL Zip Code 60201
 Date of Receipt 01 / 16 / 2013
Transaction ID : 3556763
 Amount of Each Receipt this Period 1000.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Partner/Investment Analyst Congaree River Ltd.
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

B. Dr. Lucy Stuart Tompkins , M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 Navajo Place
 City Portola Valley State CA Zip Code 94028
 Date of Receipt 01 / 21 / 2013
Transaction ID : 3562319
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 physician/professor Stanford University
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

C. PJ Torokvei
 Full Name (Last, First, Middle Initial)
 Mailing Address 15250 Ventura Blvd Suite 710
 City Sherman Oaks State CA Zip Code 91403
 Date of Receipt 01 / 07 / 2013
Transaction ID : 3553702
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 writer self
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

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: (check only one)	PAGE 270 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Lili Townsend		Date of Receipt
Mailing Address 3288 Waileia Place		M M M / D D D / Y Y Y Y Y Y 01 / 22 / 2013
City	State	Zip Code
Wailea	HI	96753
FEC ID number of contributing federal political committee.		Transaction ID : 3562802
C		Amount of Each Receipt this Period
		550.00
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		550.00
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Marjorie Traub		Date of Receipt
Mailing Address 2760 Vallejo Street		M M M / D D D / Y Y Y Y Y Y 01 / 22 / 2013
City	State	Zip Code
San Francisco	CA	94123
FEC ID number of contributing federal political committee.		Transaction ID : 3562810
C		Amount of Each Receipt this Period
		1000.00
Name of Employer	Occupation	
ret.	none	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		1000.00
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Jennifer L. Treat		Date of Receipt
Mailing Address 3250 Tennyson St NW		M M M / D D D / Y Y Y Y Y Y 01 / 11 / 2013
City	State	Zip Code
Washington	DC	20015
FEC ID number of contributing federal political committee.		Transaction ID : 3554896
C		Amount of Each Receipt this Period
		2500.00
Name of Employer	Occupation	
Consultant	Self	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		2500.00
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	4050.00
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 271 OF 578
	<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)
EMILY's List

A. Ms. Melissa Trevvett
Full Name (Last, First, Middle Initial)
Mailing Address 1038 Beacon St Apt 400

City Brookline	State MA	Zip Code 2446
-------------------	-------------	------------------

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

Name of Employer Librarian	Occupation Boston Library Consortium
-------------------------------	---

Receipt For:
 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
01	/	18	/	2013

Transaction ID : 3569963

Amount of Each Receipt this Period
100.00

B. Ms. Melissa Trevvett
Full Name (Last, First, Middle Initial)
Mailing Address 1038 Beacon St Apt 400

City Brookline	State MA	Zip Code 2446
-------------------	-------------	------------------

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

Name of Employer Librarian	Occupation Boston Library Consortium
-------------------------------	---

Receipt For:
 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
01	/	23	/	2013

Transaction ID : 3563633

Amount of Each Receipt this Period
125.00

C. Ms. Carol Triebel
Full Name (Last, First, Middle Initial)
Mailing Address 2829 Nottingham St.

City Houston	State TX	Zip Code 77005
-----------------	-------------	-------------------

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

Name of Employer Manager, chemical manufacturing	Occupation Orica
---	---------------------

Receipt For:
 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
01	/	05	/	2013

Transaction ID : 3551878

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1225.00
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 272 OF 578
	(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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Kathleen S. Trued		Date of Receipt
Mailing Address 2 Dondanville Road Unit 303		<input type="text" value="01"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
City St Augustine	State FL	Zip Code 32080
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3552105
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Kathleen S. Trued		Date of Receipt
Mailing Address 2 Dondanville Road Unit 303		<input type="text" value="01"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City St Augustine	State FL	Zip Code 32080
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3553235
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) C. Carol Truesdell		Date of Receipt
Mailing Address 9 Woodland Road		<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City Edina	State MN	Zip Code 55424
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3569544
Name of Employer Retired	Occupation N/A	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
	<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="750.00"/>
TOTAL 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: (check only one)	PAGE 273 OF 578
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Anne S. Twitchell		Date of Receipt
Mailing Address 8580 Woodway Dr Apt 1205		<input type="text" value="01"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City	State	Zip Code
Houston	TX	77063
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3566080
Name of Employer	Occupation	Amount of Each Receipt this Period
retired librarian	EPA	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) B. Ms. Eleanor Vandenheuvel		Date of Receipt
Mailing Address 3718 S. 334th Street		<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	Zip Code
Auburn	WA	98001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3568537
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED(R.N.)	Retired	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Jane Vandeventer		Date of Receipt
Mailing Address 101 Fox Hunt Pt.		<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2013"/>
City	State	Zip Code
Nashville	TN	37221
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3569182
Name of Employer	Occupation	Amount of Each Receipt this Period
Retired	N/A	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1800.00"/>
TOTAL 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: (check only one)	PAGE 274 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Marjorie K. VanDusen		Date of Receipt M M / D D / Y Y Y Y Y 01 / 03 / 2013 Transaction ID : 3552755
Mailing Address 24730 Cabrillo Hwy		Amount of Each Receipt this Period 1000.00
City Carmel	State CA	Zip Code 93923
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Dr. Marsha Vannicelli		Date of Receipt M M / D D / Y Y Y Y Y 01 / 08 / 2013 Transaction ID : 3554113
Mailing Address 11 Huron Avenue		Amount of Each Receipt this Period 500.00
City Cambridge	State MA	Zip Code 2138
FEC ID number of contributing federal political committee. C		
Name of Employer Psychologist	Occupation Self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mr. Alden T. Vaughan		Date of Receipt M M / D D / Y Y Y Y Y 01 / 15 / 2013 Transaction ID : 3556742
Mailing Address 50 Howland Ter.		Amount of Each Receipt this Period 300.00
City Worcester	State MA	Zip Code 1602
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Columbia University	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	1800.00
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 275 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. D. Jean Veta
 Full Name (Last, First, Middle Initial)
 Mailing Address 5507 Spruce Tree Avenue
 City Bethesda State MD Zip Code 20814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer lawyer Occupation Covington & Burling LLP
 Receipt For: 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
 01 / 07 / 2013
Transaction ID : 3553500
 Amount of Each Receipt this Period
 1000.00

B. Ms. Kathleen Villacorta
 Full Name (Last, First, Middle Initial)
 Mailing Address 2057 Florida Avenue
 City Tallahassee State FL Zip Code 32303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer attorney Occupation none
 Receipt For: 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
 01 / 27 / 2013
Transaction ID : 3566864
 Amount of Each Receipt this Period
 1000.00

C. Mary Vils
 Full Name (Last, First, Middle Initial)
 Mailing Address 4257 heffron st
 City stevens point State WI Zip Code 54481
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Homemaker Occupation Home
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 24 / 2013
Transaction ID : 3565930
 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: PAGE 276 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Patricia Vinter
 Full Name (Last, First, Middle Initial)
 Mailing Address 79 Chandler St., #7
 City Boston State MA Zip Code 2116
 Date of Receipt 01 / 28 / 2013
Transaction ID : 3567361
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

B. Ms. Elizabeth Volk
 Full Name (Last, First, Middle Initial)
 Mailing Address 1017 Bent Creek Run Drive
 City Greer State SC Zip Code 29651
 Date of Receipt 01 / 19 / 2013
Transaction ID : 3560637
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Manager Sealed Air, Corp.
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

C. Ms. Linda Voss
 Full Name (Last, First, Middle Initial)
 Mailing Address 1303 N Ode St Apt 224
 City Arlington State VA Zip Code 22209
 Date of Receipt 01 / 03 / 2013
Transaction ID : 3550283
 Amount of Each Receipt this Period 1000.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 writer self
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

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 277 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Mr. Samuel Vrooman

Mailing Address 2520 Aspen St.

City Philadelphia State PA Zip Code 19130

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

Name of Employer Dog Walker Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 25 / 2013
Transaction ID : 3566220

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Ms. Madeleine S Wachter

Mailing Address 3148 E. Table Mountain Rd.

City Tucson State AZ Zip Code 85718

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

Name of Employer activist Occupation none

Receipt For:
 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
 01 / 27 / 2013
Transaction ID : 3566782

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Mrs. Emily V. Wade

Mailing Address 251 Old Billerica Rd.

City Bedford State MA Zip Code 1730

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

Name of Employer housewife Occupation none

Receipt For:
 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
 01 / 22 / 2013
Transaction ID : 3562804

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00

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

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

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

FOR LINE NUMBER: PAGE 278 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Karen E. Wagner

Mailing Address 30 W 15Th St Apt 12S

City State Zip Code
New York NY 10011

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

Name of Employer Occupation
LAWYER DAVIS POLK & WARDWELL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 23 / 2013
Transaction ID : 3564642

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. J. Christopher Wagner

Mailing Address 2807 Adeline Dr

City State Zip Code
Burlingame CA 94010

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

Name of Employer Occupation
CTO SnapLogic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2013
Transaction ID : 3566788

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Ms. Judith B. Wagner

Mailing Address 4850 S. Dahlia Street

City State Zip Code
Littleton CO 80121

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

Name of Employer Occupation
retired retired

Receipt For:
 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
 01 / 04 / 2013
Transaction ID : 3552125

Amount of Each Receipt this Period
1000.00

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 279 OF 578
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Judith L. Wagner

Mailing Address 63 French Road

City State Zip Code
Gilmanton NH 3237

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 20 / 2013
Transaction ID : 3560269

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Ms. Nan Stockholm Walden

Mailing Address PO Box 449

City State Zip Code
Sahuarita AZ 85629

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

Name of Employer Occupation
Vice President and Counsel Farmers Investment Company

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3559683

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Ms. Roslyn E. Walker

Mailing Address 13600 Marina Pointe Drive #1406

City State Zip Code
Marina Del Rey CA 90292

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

Name of Employer Occupation
Retired None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 15 / 2013
Transaction ID : 3556170

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER: PAGE 280 OF 578
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Barbara Martin Walker
 Full Name (Last, First, Middle Initial)
 Mailing Address 42 Meadow Lakes, Apt.04
 City Hightstown State NJ Zip Code 8520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation U.S. Dept. of State
 Receipt For: 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
 01 / 19 / 2013
Transaction ID : 3560326
 Amount of Each Receipt this Period
 1000.00

B. Ms. Nancy J. Walker
 Full Name (Last, First, Middle Initial)
 Mailing Address 6414 Wiscasset Road
 City Bethesda State MD Zip Code 20816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lecturer, Consultant, Volunteer Occupation Self-Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 09 / 2013
Transaction ID : 3554482
 Amount of Each Receipt this Period
 1600.00

C. Ms. Phyllis Wallin
 Full Name (Last, First, Middle Initial)
 Mailing Address 13843 N Maxfli DR
 City Oro Valley State AZ Zip Code 85755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2013
Transaction ID : 3556591
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2850.00
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 281 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Wendy Walsh

Mailing Address 941 Mere Point Road

City Brunswick State ME Zip Code 4011

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 ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3568097

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. Ms. Linda L. Walt

Mailing Address 1080 Lake Holiday Dr.

City Sandwich State IL Zip Code 60548

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 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
 01 / 29 / 2013
Transaction ID : 3569186

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. Ms. Joan Melber Warburg

Mailing Address 216 John Street

City Greenwich State CT Zip Code 6831

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2013
Transaction ID : 3566925

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 282 OF 578
	<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)
EMILY's List

A. Richard Warner
Full Name (Last, First, Middle Initial)
Mailing Address 3100 Newport Ct.
City Arlington State TX Zip Code 76015
FEC ID number of contributing federal political committee. **C**
Name of Employer SW Engineer Occupation SDS
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2500.00

Date of Receipt
01 / 05 / 2013
Transaction ID : 3550859
Amount of Each Receipt this Period
2500.00

B. Carole Warshaw MD
Full Name (Last, First, Middle Initial)
Mailing Address 3150 N. Lake Shore #8A
City Chicago State IL Zip Code 60657
FEC ID number of contributing federal political committee. **C**
Name of Employer Physician Occupation Hektoen Institute LLC
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt
01 / 28 / 2013
Transaction ID : 3568277
Amount of Each Receipt this Period
250.00

C. Ms. Mary Burke Washington
Full Name (Last, First, Middle Initial)
Mailing Address 1330 Massachstts Ave NW # 1014
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation none
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt
01 / 30 / 2013
Transaction ID : 3569574
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... 3000.00
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 283 OF 578
	<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)
EMILY's List

A. Susan Watson
Full Name (Last, First, Middle Initial)
Mailing Address 4064 1st Ave N.E.
City Seattle State WA Zip Code 98105
FEC ID number of contributing federal political committee. **C**
Name of Employer retired RN Occupation none
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 19 / 2013
Transaction ID : 3561511
Amount of Each Receipt this Period
250.00

B. Mr. J. Dix Wayman
Full Name (Last, First, Middle Initial)
Mailing Address 917 Danby RD
City Ithaca State NY Zip Code 14850
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED DENTIST Occupation Self
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 29 / 2013
Transaction ID : 3568538
Amount of Each Receipt this Period
1250.00

C. Ms. Marcia D Weber
Full Name (Last, First, Middle Initial)
Mailing Address 138 West Hill Terrace
City Painted Post State NY Zip Code 14870
FEC ID number of contributing federal political committee. **C**
Name of Employer Executive Director Occupation Southern Tier Central Regional Plannin
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
01 / 05 / 2013
Transaction ID : 3551603
Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 4000.00
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 284 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Dr. Alex. Weilenmann		Date of Receipt M M / D D / Y Y Y Y Y 01 / 19 / 2013 Transaction ID : 3558846
Mailing Address 307 S. Dithridge St. Apt.. 509		Amount of Each Receipt this Period 250.00
City Pittsburgh	State Zip Code PA 15213	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer retired	Occupation none	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Dr. Alex. Weilenmann		Date of Receipt M M / D D / Y Y Y Y Y 01 / 27 / 2013 Transaction ID : 3566781
Mailing Address 307 S. Dithridge St. Apt.. 509		Amount of Each Receipt this Period 250.00
City Pittsburgh	State Zip Code PA 15213	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer retired	Occupation none	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Ms. Mary Weinland		Date of Receipt M M / D D / Y Y Y Y Y 01 / 07 / 2013 Transaction ID : 3552749
Mailing Address 2 Nutmeg CT		Amount of Each Receipt this Period 500.00
City Mansfield Center	State Zip Code CT 6250	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

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 285 OF 578
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Dr. Cheryl E. Weinstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 18600 South Woodland Road
 City State Zip Code
 Shaker Heights OH 44122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 physician-semi retired metrohealth medical center
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 05 / 2013
Transaction ID : 3550883
 Amount of Each Receipt this Period
 500.00

B. Ms. Susan Welch
 Full Name (Last, First, Middle Initial)
 Mailing Address 555 Ridge Ave
 City State Zip Code
 State College PA 16803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Professor Penn State
 Receipt For:
 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
 01 / 22 / 2013
Transaction ID : 3563599
 Amount of Each Receipt this Period
 300.00

C. Ms. Emilie Welles
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 Hubbard St
 City State Zip Code
 Concord MA 1742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 16 / 2013
Transaction ID : 3556524
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00
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 286 OF 578
(check only one)
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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Juanita M. Wellington
 Full Name (Last, First, Middle Initial)
 Mailing Address 7801 76TH St. SW
 City Lakewood State WA Zip Code 98498
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2013
Transaction ID : 3569534
 Amount of Each Receipt this Period
 250.00

B. Ms. G. Jeanette Wells
 Full Name (Last, First, Middle Initial)
 Mailing Address 1310 Howell St.
 City McKinney State TX Zip Code 75069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED EDUCATION Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2013
Transaction ID : 3568793
 Amount of Each Receipt this Period
 500.00

C. Ms. Mary Jo Wenckus
 Full Name (Last, First, Middle Initial)
 Mailing Address 203 Tryon Farm Lane
 City Michigan City State IN Zip Code 46360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer manager Occupation at&t
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 30 / 2013
Transaction ID : 3569796
 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 287 OF 578
	<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)
EMILY's List

A. Ms. Bonnie C. Wentworth
 Full Name (Last, First, Middle Initial)
 Mailing Address 4616 Dolores Avenue
 City State Zip Code
 Oakland CA 94602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 executive coach & company founder Wentworth Consulting Group
 Receipt For:
 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
 01 / 07 / 2013
Transaction ID : 3552303
 Amount of Each Receipt this Period
 350.00

B. Ms. Linda White
 Full Name (Last, First, Middle Initial)
 Mailing Address 1120 E Balboa Blvd.
 City State Zip Code
 Newport Beach CA 92661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ARTIST Self
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 08 / 2013
Transaction ID : 3554112
 Amount of Each Receipt this Period
 250.00

C. Ms. Susan Whitehead
 Full Name (Last, First, Middle Initial)
 Mailing Address 505 Tremont St Unit 901
 City State Zip Code
 Boston MA 2116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired n/a
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 07 / 2013
Transaction ID : 3553314
 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: (check only one)	PAGE 288 OF 578
	<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)
EMILY's List

A. Ms. Anne Whitlock
Full Name (Last, First, Middle Initial)

Mailing Address 3516 Robinhood St.

City Houston State TX Zip Code 77005

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

Name of Employer Non Profit Management Occupation Not Currently Employed

Receipt For:
 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
 01 / 04 / 2013
Transaction ID : 3552106

Amount of Each Receipt this Period
 1000.00

B. Ms. Carole L Widmayer
Full Name (Last, First, Middle Initial)

Mailing Address 333 N. Jefferson, #403

City Chicago State IL Zip Code 60661

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

Name of Employer Advertising Occupation Schafer Condon Carter

Receipt For:
 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
 01 / 28 / 2013
Transaction ID : 3568278

Amount of Each Receipt this Period
 100.00

C. Ms. Carole L Widmayer
Full Name (Last, First, Middle Initial)

Mailing Address 333 N. Jefferson, #403

City Chicago State IL Zip Code 60661

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

Name of Employer Advertising Occupation Schafer Condon Carter

Receipt For:
 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
 01 / 01 / 2013
Transaction ID : 3548627

Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1225.00

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 289 OF 578
	<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)
EMILY's List

A. Dr. Nancy G. Wilds
Full Name (Last, First, Middle Initial)

Mailing Address 35 Bangs Shore Rd

City Orrs Island State ME Zip Code 4066

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

Name of Employer retired Occupation n.a.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 06 / 2013
Transaction ID : 3552532

Amount of Each Receipt this Period
250.00

B. Ms. Laura Wilhelm
Full Name (Last, First, Middle Initial)

Mailing Address 2901 W Farragut # 1-S

City Chicago State IL Zip Code 60625

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

Name of Employer CPA Occupation self

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3559423

Amount of Each Receipt this Period
500.00

C. Mrs. Debra C Wilkinson
Full Name (Last, First, Middle Initial)

Mailing Address 689 W 8TH ST

City Zumbrota State MN Zip Code 55992

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

Name of Employer homemaker Occupation self

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2013
Transaction ID : 3569360

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: (check only one)	PAGE 290 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Shirley Willcox		Date of Receipt
Mailing Address 1115 Ashlar Village		<input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2013"/>
City	State	Zip Code
Wallingford	CT	6492
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3574054
Name of Employer	Occupation	Amount of Each Receipt this Period
REQUESTED	REQUESTED	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. Angela Williams		Date of Receipt
Mailing Address 8406 E 35th Ave		<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code
Denver	CO	80238
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3554216
Name of Employer	Occupation	Amount of Each Receipt this Period
State Representative	State of Colorado	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Patricia Williams		Date of Receipt
Mailing Address 233 El Faisan Dr		<input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code
San Rafael	CA	94903
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3555128
Name of Employer	Occupation	Amount of Each Receipt this Period
Speech Pathologist	Fresno USD	<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1500.00"/>
TOTAL 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: (check only one)	PAGE 291 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ms. Constance H. Williams		Date of Receipt
Mailing Address 307 Brentford Road		<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code
Haverford	PA	19041
FEC ID number of contributing federal political committee.		Transaction ID : 3553979
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Marie C. Wilson		Date of Receipt
Mailing Address 5 East 22nd #29d		<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code
New York City	NY	10010
FEC ID number of contributing federal political committee.		Transaction ID : 3553829
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
exec/writer	self	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. John I. Wilson		Date of Receipt
Mailing Address 5007 Dunwoody Trl.		<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2013"/>
City	State	Zip Code
Raleigh	NC	27606
FEC ID number of contributing federal political committee.		Transaction ID : 3563581
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>
Name of Employer	Occupation	
REQUESTED	REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2300.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 292 OF 578
	<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)
EMILY's List

A. Ms. Marie C. Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 5 East 22nd #29d

City New York City	State NY	Zip Code 10010
FEC ID number of contributing federal political committee. C		
Name of Employer exec/writer	Occupation self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Date of Receipt
01 / 08 / 2013
Transaction ID : 3553826

Amount of Each Receipt this Period
1000.00

B. Ms. Allyne Winderman
Full Name (Last, First, Middle Initial)
Mailing Address 3660 Shannon Rd

City Los Angeles	State CA	Zip Code 90027
FEC ID number of contributing federal political committee. C		
Name of Employer architect	Occupation self employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
01 / 12 / 2013
Transaction ID : 3554916

Amount of Each Receipt this Period
250.00

C. Ms. Alice Wingwall
Full Name (Last, First, Middle Initial)
Mailing Address 2717 Russell Street

City Berkeley	State CA	Zip Code 94075
FEC ID number of contributing federal political committee. C		
Name of Employer Photographer	Occupation Self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
01 / 22 / 2013
Transaction ID : 3562765

Amount of Each Receipt this Period
250.00

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 293 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Suzanne Winkelman
 Full Name (Last, First, Middle Initial)
 Mailing Address 6411 Burseson Rd
 City Austin State TX Zip Code 78744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mother Occupation na
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3562770
 Amount of Each Receipt this Period
 2500.00

B. Susan Woelzl
 Full Name (Last, First, Middle Initial)
 Mailing Address 128 Headley Terr
 City Irvington State NJ Zip Code 7111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer publicity Occupation retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 05 / 2013
Transaction ID : 3551566
 Amount of Each Receipt this Period
 75.00

C. Susan Woelzl
 Full Name (Last, First, Middle Initial)
 Mailing Address 128 Headley Terr
 City Irvington State NJ Zip Code 7111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer publicity Occupation retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3563658
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2825.00
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 294 OF 578
	<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)
EMILY's List

A. Ms. Wendy C. Wolf
Full Name (Last, First, Middle Initial)

Mailing Address 224 Valley Ridge Road

City Haverford State PA Zip Code 19041

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 ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 09 / 2013
Transaction ID : 3554486

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 26 Bay Vista Dr

City mill valley State CA Zip Code 94941

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

Name of Employer attorney Occupation DWK

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 21 / 2013
Transaction ID : 3562582

Amount of Each Receipt this Period
 500.00

C. Ms. Sarah Woodin
Full Name (Last, First, Middle Initial)

Mailing Address 4645 Datura RD

City Columbia State SC Zip Code 29205

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

Name of Employer UNIVERSITY FACULTY Occupation university south carolina

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 29 / 2013
Transaction ID : 3569183

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	3250.00
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 295 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Deon Woods Bell			Date of Receipt
Mailing Address 3102 Hawthorne St NW			<input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : 3555426
Washington	DC	20008	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="250.00"/>
Name of Employer	Occupation		
REQUESTED	REQUESTED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Lil Woolf			Date of Receipt
Mailing Address 1441 Hearst Drive			<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : 3568801
Atlanta	GA	30319	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="250.00"/>
Name of Employer	Occupation		
retired	retired		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. Frederick W. Wright			Date of Receipt
Mailing Address 4007 63rd Street			<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : 3570443
Bethesda	MD	20816	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="300.00"/>
Name of Employer	Occupation		
retired	non		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="800.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 296 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. W. Redwood Wright
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 54
 City Woods Hole State MA Zip Code 2543
 Date of Receipt: 01 / 28 / 2013
Transaction ID : 3568065
 Amount of Each Receipt this Period: 500.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: REQUESTED Occupation: REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 500.00

B. Dr. Ruth Wukasch
 Full Name (Last, First, Middle Initial)
 Mailing Address 5702 Harrods Run Rd
 City Prospect State KY Zip Code 40059
 Date of Receipt: 01 / 15 / 2013
Transaction ID : 3555457
 Amount of Each Receipt this Period: 250.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: Retired - Professor Emeritus Occupation: Purdue University
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 250.00

C. Ms. Ruth B. Yeazell
 Full Name (Last, First, Middle Initial)
 Mailing Address 80 bethmour road
 City Bethany State CT Zip Code 6524
 Date of Receipt: 01 / 19 / 2013
Transaction ID : 3560299
 Amount of Each Receipt this Period: 250.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: professor Occupation: yale u
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 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: (check only one)	PAGE 297 OF 578
	<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Shirley Young		Date of Receipt M M / D D / Y Y Y Y Y 01 / 30 / 2013 Transaction ID : 3569568
Mailing Address 1500 N Astor St		Amount of Each Receipt this Period 250.00
City Chicago	State IL	Zip Code 60610
FEC ID number of contributing federal political committee. C		
Name of Employer designer	Occupation self	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. E. Young		Date of Receipt M M / D D / Y Y Y Y Y 01 / 23 / 2013 Transaction ID : 3563993
Mailing Address PO Box 4624		Amount of Each Receipt this Period 250.00
City Roanoke	State VA	Zip Code 24015
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation none	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Linda Young		Date of Receipt M M / D D / Y Y Y Y Y 01 / 08 / 2013 Transaction ID : 3554219
Mailing Address 7000 Timarou Ter		Amount of Each Receipt this Period 500.00
City Austin	State TX	Zip Code 78754
FEC ID number of contributing federal political committee. C		
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

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 298 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mr. George Zaine
 Full Name (Last, First, Middle Initial)
 Mailing Address 2361 E 29th St. # 130
 City State Zip Code
 Oakland CA 94606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 03 / 2013
Transaction ID : 3550266
 Amount of Each Receipt this Period
 2000.00

B. Ms. J.A. Zaitlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 297 Berkeley Park Blvd.
 City State Zip Code
 Kensington CA 94707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2013
Transaction ID : 3555461
 Amount of Each Receipt this Period
 2500.00

C. Ms. Paula Klein Zeid
 Full Name (Last, First, Middle Initial)
 Mailing Address 1806 N Wood St.
 City State Zip Code
 Chicago IL 60622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 retired none
 Receipt For:
 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
 01 / 15 / 2013
Transaction ID : 3556590
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00
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 299 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Adrienne Zihlman
 Full Name (Last, First, Middle Initial)
 Mailing Address 624 Arroyo Seco
 City Santa Cruz State CA Zip Code 95060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 15 / 2013
Transaction ID : 3556570
 Amount of Each Receipt this Period
 500.00

B. Ms. Christina M Zimbardo
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 Montclair Terrace
 City San Francisco State CA Zip Code 94109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Professor Occupation University of California
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 20 / 2013
Transaction ID : 3561990
 Amount of Each Receipt this Period
 250.00

C. Mrs. Jane Zimmerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 5210 Rutherglenn Drive
 City Houston State TX Zip Code 77096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 18 / 2013
Transaction ID : 3570091
 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 300 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Suzanne T. Zorn
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 Portland Ct.
 City State Zip Code
 Saint Louis MO 63108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED none
 Receipt For:
 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
 01 / 18 / 2013
Transaction ID : 3570007
 Amount of Each Receipt this Period
 1000.00

B. ActBlue
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 382110
 City State Zip Code
 Cambridge MA 02238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2013
Transaction ID : 4527518
 Amount of Each Receipt this Period
 399.25
 Total Cntrbs through Conduit 1/01/13-1/31/13
[MEMO ITEM]

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

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	568965.00

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

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

FOR LINE NUMBER: PAGE 301 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. DCCC
 Full Name (Last, First, Middle Initial)
 Mailing Address 430 South Capitol Street, S.E.
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 07 / 2013
Transaction ID : 3563946
 Amount of Each Receipt this Period
 2500.00

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).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 302 OF 578
<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Security & Medicare PAC		Date of Receipt
Mailing Address 10 G Street NE Ste 600		<input type="text" value="01"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City Washington State DC Zip Code 20002		Transaction ID : 3552805
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation		<input type="text" value="500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) B. American Optometric Association PAC		Date of Receipt
Mailing Address 1505 Prince Street Suite 300		<input type="text" value="01"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
City Alexandria State VA Zip Code 22314		Transaction ID : 3566152
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation		<input type="text" value="2500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="2500.00"/>	

Full Name (Last, First, Middle Initial) C. Glover Park PAC		Date of Receipt
Mailing Address 607 14th St NW Ste 800		<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City Washington State DC Zip Code 20005		Transaction ID : 3568490
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation		<input type="text" value="2500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="2500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="5500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="5500.00"/>

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

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

FOR LINE NUMBER: PAGE 303 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. ABC of UFCW

Mailing Address 1775 K St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 09 / 2013
Transaction ID : 3554491

Amount of Each Receipt this Period
5000.00

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

Mailing Address 1625 L Street, N.W.

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 17 / 2013
Transaction ID : 3558199

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. American Association for Justice PAC

Mailing Address 777 6th Street NW

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 22 / 2013
Transaction ID : 3562772

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 15000.00

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 304 OF 578
<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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. NEA Fund for Children & Public Educ. PAC

Mailing Address 1201 16th Street, N.W.
Suite 421

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 23 / 2013
Transaction ID : 3563977

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. Shorr Johnson Magnus

Mailing Address 1831 Chestnut Street, Ste. 602

City Philadelphia State PA Zip Code 19103

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 08 / 2013
Transaction ID : 3554220

Amount of Each Receipt this Period
2500.00

Transfer \$2,500 to NF 2/13/13

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	28000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 305 OF 578
<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. WeConnect		Date of Receipt
Mailing Address 3556 13th St NW Suite 100		<input type="text" value="01"/> / <input type="text" value="02"/> / <input type="text" value="2013"/>
City	State	Transaction ID : 1200
Washington	DC	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="2330.00"/>
Name of Employer	Occupation	Rent at Fair Market Value
Receipt For:	Aggregate Year-to-Date ▼	Orig Vendor: Jack I. Bender & Sons
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="0.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Grassroots Solutions		Date of Receipt
Mailing Address 222 West Ontario Suite 300		<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Transaction ID : 1201
Chicago	IL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="3245.00"/>
Name of Employer	Occupation	Rent at Fair Market Value
Receipt For:	Aggregate Year-to-Date ▼	Orig Vendor: Jack I. Bender & Sons
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="0.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Grassroots Solutions		Date of Receipt
Mailing Address 222 West Ontario Suite 300		<input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Transaction ID : 1202
Chicago	IL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="47.25"/>
Name of Employer	Occupation	Telephone at Fair Market Value
Receipt For:	Aggregate Year-to-Date ▼	Orig Vendor: Working Assets
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="0.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="5622.25"/>
TOTAL 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: (check only one)	PAGE 306 OF 578
<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Tides Center		Date of Receipt
Mailing Address PO Box 29907		<input type="text" value="01"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
San Francisco	CA	94129
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 1203
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="4.77"/>
Receipt For:	Aggregate Year-to-Date ▼	Telephone at Fair Market Value
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="0.00"/>	Orig Vendor: Working Assets

Full Name (Last, First, Middle Initial) B. Premium Payment Services		Date of Receipt
Mailing Address PO Box 2998		<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code
Alpharett	GA	30023
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 1204
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="1747.01"/>
Receipt For:	Aggregate Year-to-Date ▼	Health Insurance Refund
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="0.00"/>	Orig Vendor: CareFirst

Full Name (Last, First, Middle Initial) C. Production Solutions		Date of Receipt
Mailing Address 1953 Gallows Road Suite 600		<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>
City	State	Zip Code
Vienna	VA	22182
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 1205
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="344.64"/>
Receipt For:	Aggregate Year-to-Date ▼	Postage Refund
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="0.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="2096.42"/>
TOTAL 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: (check only one)	PAGE 307 OF 578
<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)
EMILY's List

A. Tides Center
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 29907

City San Francisco	State CA	Zip Code 94129
-----------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	28	/	2013

Transaction ID : 1217

Amount of Each Receipt this Period
7592.08

Rent at Fair Market Value

Orig Vendor: Jack I. Bender & Sons

B. KG Consulting
Full Name (Last, First, Middle Initial)
Mailing Address 5009 Belt Rd

City Washington	State DC	Zip Code 20016
--------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2013

Transaction ID : 1218

Amount of Each Receipt this Period
2254.98

Rent at Fair Market Value

Org Vendor: Jack I. Bender & Sons

C. Jen Bluestein
Full Name (Last, First, Middle Initial)
Mailing Address 5617 N. 23rd Street

City Arlington	State VA	Zip Code 22205
-------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2013

Transaction ID : 1206

Amount of Each Receipt this Period
698.60

Travel at Fair Market Value

Orig Vendor: Amex

SUBTOTAL of Receipts This Page (optional).....▶	10545.66
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 308 OF 578
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. SaBrina Brown
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 1265
City North Beach State MD Zip Code 20714
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
01 / 31 / 2013
Transaction ID : 1207
Amount of Each Receipt this Period 0.86
Telephone at Fair Market Value
Orig Vendor: Working Assets

B. SaBrina Brown
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 1265
City North Beach State MD Zip Code 20714
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
01 / 31 / 2013
Transaction ID : 1208
Amount of Each Receipt this Period 14.95
Travel at Fair Market Value
Orig Vendor: Amex

C. Denise Ferriozzi
Full Name (Last, First, Middle Initial)
Mailing Address 31 Washington Place
City Madison State WI Zip Code 53703
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
MM / DD / YYYY
01 / 31 / 2013
Transaction ID : 1209
Amount of Each Receipt this Period 1.81
Telephone at Fair Market Value
Orig Vendor: Verizon

SUBTOTAL of Receipts This Page (optional).....▶	17.62
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 309 OF 578
<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ellen Malcolm		Date of Receipt MM / DD / YYYY 01 / 31 / 2013 Transaction ID : 1210
Mailing Address 5060 Linnean Ave		Amount of Each Receipt this Period 4.90
City Washington	State DC	Zip Code 20008
FEC ID number of contributing federal political committee. C	Postage at Fair Market Value	
Name of Employer	Occupation	Orig Vendor: Purchase Power
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Ellen Malcolm		Date of Receipt MM / DD / YYYY 01 / 31 / 2013 Transaction ID : 1211
Mailing Address 5060 Linnean Ave		Amount of Each Receipt this Period 45.23
City Washington	State DC	Zip Code 20008
FEC ID number of contributing federal political committee. C	Travel at Fair Market Value	
Name of Employer	Occupation	Orig Vendor: Red Top
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Kali Murphy		Date of Receipt MM / DD / YYYY 01 / 31 / 2013 Transaction ID : 1212
Mailing Address 461 N Thomas Street #417		Amount of Each Receipt this Period 423.99
City Arlington	State VA	Zip Code 22203
FEC ID number of contributing federal political committee. C	Telephone at Fair Market Value	
Name of Employer	Occupation	Orig Vendor: Apple
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional).....▶	474.12
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 310 OF 578
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Jonathan Parker		Date of Receipt MM / DD / YYYY 01 / 31 / 2013 Transaction ID : 1213
Mailing Address 1611 Hobart Street, NW		Amount of Each Receipt this Period 90.00
City Washington	State DC	Zip Code 20009
FEC ID number of contributing federal political committee. C	Telephone at Fair Market Value	
Name of Employer	Occupation	Orig Vendor: Verizon
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) B. Stephanie Schriock		Date of Receipt MM / DD / YYYY 01 / 31 / 2013 Transaction ID : 1214
Mailing Address 3225 Valley Drive		Amount of Each Receipt this Period 44.15
City Alexandria	State VA	Zip Code 22302
FEC ID number of contributing federal political committee. C	Delivery at Fair Market Value	
Name of Employer	Occupation	Orig Vendor: FedEx
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

Full Name (Last, First, Middle Initial) C. Kate Stoner		Date of Receipt MM / DD / YYYY 01 / 31 / 2013 Transaction ID : 1215
Mailing Address 929 7th Street NE		Amount of Each Receipt this Period 0.45
City Washington	State DC	Zip Code 20002
FEC ID number of contributing federal political committee. C	Postage at Fair Market Value	
Name of Employer	Occupation	Orig Vendor: Purchase Power
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional).....▶	134.60
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 311 OF 578
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Louisa Farley
 Full Name (Last, First, Middle Initial)
 Mailing Address 1701 16th Street, NW #721
 City Washington State DC Zip Code 20009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 01 / 31 / 2013
Transaction ID : 1216
 Amount of Each Receipt this Period 101.59
 Telephone at Fair Market Value
 Orig Vendor: Verizon

B. SD&A Teleservices
 Full Name (Last, First, Middle Initial)
 Mailing Address 5757 West Century Blvd Suite 300
 City Los Angeles State CA Zip Code 90045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 01 / 31 / 2013
Transaction ID : 1219
 Amount of Each Receipt this Period 7459.59
 Telemarketing Refund

C. Armfield Harrison & Thomas Inc
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 South King Street
 City Leesburg State VA Zip Code 20175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 01 / 31 / 2013
Transaction ID : 1220
 Amount of Each Receipt this Period 7149.00
 Insurance Refund

SUBTOTAL of Receipts This Page (optional).....	14710.18
TOTAL This Period (last page this line number only).....	33600.85

**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 312 OF 578
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. Bank of America		Date of Receipt
Mailing Address 1501 Pennsylvania Ave NW		<input type="text" value="01"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 1003
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="21.82"/>
Interest		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="21.82"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Fifth Third Bank		Date of Receipt
Mailing Address 6201 15th Ave		<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2013"/>
City	State	Zip Code
Brooklyn	NY	11219
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 1001
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="1.50"/>
Dividend		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1.50"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Merrill Lynch		Date of Receipt
Mailing Address 1152 15th St NW		<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 1005
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="176.70"/>
Sale of 3 shs P&G Orig Cntrb:Sylvie Falk 1/29/13		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="0.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="200.02"/>
TOTAL 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 313 OF 578
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Bank of America

Mailing Address 1501 Pennsylvania Ave NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **40.14**

Date of Receipt **01 / 30 / 2013**
Transaction ID : 1004

Amount of Each Receipt this Period **40.14**

Interest

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

Mailing Address 1152 15th St NW

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **10.64**

Date of Receipt **01 / 31 / 2013**
Transaction ID : 1002

Amount of Each Receipt this Period **10.64**

Dividends

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	50.78
TOTAL This Period (last page this line number only).....▶	250.80

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. John Hancock c/o City Bank Delaware

Mailing Address 1615 Brett Road Lock Box 7122

City New Castle State DE Zip Code 19720

Purpose of Disbursement
Employment Pension/ 401(k)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 02 / 2013

Transaction ID : SB21B-204016

Amount of Each Disbursement this Period

27215.49

Full Name (Last, First, Middle Initial)

B. John Hancock c/o City Bank Delaware

Mailing Address 1615 Brett Road Lock Box 7122

City New Castle State DE Zip Code 19720

Purpose of Disbursement
Employment Pension/ 401(k)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 02 / 2013

Transaction ID : SB21B-204017

Amount of Each Disbursement this Period

10137.33

Full Name (Last, First, Middle Initial)

C. Elavon

Mailing Address One Concourse Parkway
Ste 300

City Atlanta State GA Zip Code 30328

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 02 / 2013

Transaction ID : SB21B-204181

Amount of Each Disbursement this Period

292.68

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

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

37645.50

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address 808 East Utah Valley Drive

City American Fork State UT Zip Code 84003

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-204202

Amount of Each Disbursement this Period

17.95

Category/
Type

Full Name (Last, First, Middle Initial)

B. First Data Merchant Services

Mailing Address PO Box 6010

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-204201

Amount of Each Disbursement this Period

66.71

Category/
Type

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address 808 East Utah Valley Drive

City American Fork State UT Zip Code 84003

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-204182

Amount of Each Disbursement this Period

1013.95

Category/
Type

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

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

1098.61

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : **SB21B-204185**

Amount of Each Disbursement this Period

0.99

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 401 N Washington St
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : **SB21B-203688**

Amount of Each Disbursement this Period

132.29

Full Name (Last, First, Middle Initial)

C. Associated Press

Mailing Address 450 West 33rd Street

City New York City State NY Zip Code 10001

Purpose of Disbursement
Design/Graphics

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : **SB21B-203689**

Amount of Each Disbursement this Period

200.00

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

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

333.28

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jack I. Bender & Sons

Mailing Address 1120 Connecticut Ave, NW
Suite 1200

City Washington State DC Zip Code 20036

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203690

Amount of Each Disbursement this Period

66.25

Full Name (Last, First, Middle Initial)

B. Morgan Cahn

Mailing Address 26688 Martinique Drive

City Orange Beach State AL Zip Code 36561

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203691

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

C. Jackson River

Mailing Address 2535 13th St NW
#005

City Washington State DC Zip Code 20009

Purpose of Disbursement
Media -Generic Mail/TV/Radio

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203693

Amount of Each Disbursement this Period

1462.50

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

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

2328.75

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jackson River

Mailing Address 2535 13th St NW
#005

City Washington State DC Zip Code 20009

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203694

Amount of Each Disbursement this Period

7250.00

Full Name (Last, First, Middle Initial)

B. Jackson River

Mailing Address 2535 13th St NW
#005

City Washington State DC Zip Code 20009

Purpose of Disbursement
Media -Generic Mail/TV/Radio

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203695

Amount of Each Disbursement this Period

900.00

Full Name (Last, First, Middle Initial)

C. Superior Building Services Inc JIB Service Group

Mailing Address 1120 Connecticut Ave, NW Ste 1200

City Washington State DC Zip Code 20036

Purpose of Disbursement
Building Utilities & Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203696

Amount of Each Disbursement this Period

1147.45

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

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

9297.45

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. MetLife Small Business Center

Mailing Address PO Box 804466

City Kansas City State MO Zip Code 64180

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203697

Amount of Each Disbursement this Period

2365.34

Full Name (Last, First, Middle Initial)

B. Nexus Direct

Mailing Address 2101 Parks Avenue Ste 600

City Virginia Beach State VA Zip Code 23451

Purpose of Disbursement
List Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203698

Amount of Each Disbursement this Period

1375.00

Full Name (Last, First, Middle Initial)

C. Nexus Direct

Mailing Address 2101 Parks Avenue Ste 600

City Virginia Beach State VA Zip Code 23451

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203699

Amount of Each Disbursement this Period

3125.00

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

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

6865.34

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Nexus Direct

Mailing Address 2101 Parks Avenue
Ste 600

City Virginia Beach State VA Zip Code 23451

Purpose of Disbursement
Copy Writer

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
0	1		0	3		2	0	1	3

Transaction ID : SB21B-203700

Amount of Each Disbursement this Period

4	5	7	5	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Nexus Direct

Mailing Address 2101 Parks Avenue
Ste 600

City Virginia Beach State VA Zip Code 23451

Purpose of Disbursement
Data Management

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
0	1		0	3		2	0	1	3

Transaction ID : SB21B-203701

Amount of Each Disbursement this Period

3	0	6	9	.	4	7
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Nexus Direct

Mailing Address 2101 Parks Avenue
Ste 600

City Virginia Beach State VA Zip Code 23451

Purpose of Disbursement
Deliveries

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
0	1		0	3		2	0	1	3

Transaction ID : SB21B-203702

Amount of Each Disbursement this Period

2	5	0	.	0	0
---	---	---	---	---	---

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

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

7	8	9	.	4	7
---	---	---	---	---	---

7	8	9	.	4	7
---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Nexus Direct

Mailing Address 2101 Parks Avenue
Ste 600

City Virginia Beach State VA Zip Code 23451

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203703

Amount of Each Disbursement this Period

8126.81

Full Name (Last, First, Middle Initial)

B. Nexus Direct

Mailing Address 2101 Parks Avenue
Ste 600

City Virginia Beach State VA Zip Code 23451

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203704

Amount of Each Disbursement this Period

17932.95

Full Name (Last, First, Middle Initial)

C. Nexus Direct

Mailing Address 2101 Parks Avenue
Ste 600

City Virginia Beach State VA Zip Code 23451

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203705

Amount of Each Disbursement this Period

42158.83

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

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

68218.59

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Production Solutions, Inc.

Mailing Address 1953 Gallows Road
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203706

Amount of Each Disbursement this Period

225.80

Category/
Type

Full Name (Last, First, Middle Initial)

B. Production Solutions, Inc.

Mailing Address 1953 Gallows Road
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203707

Amount of Each Disbursement this Period

1100.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. Production Solutions, Inc.

Mailing Address 1953 Gallows Road
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement
Postage Credit

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203708

Amount of Each Disbursement this Period

-985.65

Category/
Type

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

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

340.15

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Production Solutions, Inc.

Mailing Address 1953 Gallows Road
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203709

Amount of Each Disbursement this Period

4260.02

Full Name (Last, First, Middle Initial)

B. Production Solutions, Inc.

Mailing Address 1953 Gallows Road
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203710

Amount of Each Disbursement this Period

1450.00

Full Name (Last, First, Middle Initial)

C. Production Solutions, Inc.

Mailing Address 1953 Gallows Road
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2013

Transaction ID : SB21B-203715

Amount of Each Disbursement this Period

24.39

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

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

5734.41

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Safeguard Shredding Attn: Accounts Receivable

Date of Disbursement

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

Mailing Address PO Box 3219

Transaction ID : SB21B-203716

City State Zip Code
Oakton VA 22124

Amount of Each Disbursement this Period

1	6	3	.	2	0
---	---	---	---	---	---

Purpose of Disbursement
Office Supplies Expenses

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Jennifer Treat Fundraising Ink

Date of Disbursement

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

Mailing Address 3250 Tennyson St NW

Transaction ID : SB21B-203717

City State Zip Code
Washington DC 20015

Amount of Each Disbursement this Period

1	2	5	0	0	0
---	---	---	---	---	---

Purpose of Disbursement
Consulting Fundraising

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. American Express

Date of Disbursement

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

Mailing Address P.O. Box 0001

Transaction ID : SB21B-204184

City State Zip Code
Chicago IL 60679

Amount of Each Disbursement this Period

6	4	.	0	6
---	---	---	---	---

Purpose of Disbursement
Credit Card Service Charges

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

1	2	7	2	7	.	2	6
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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 07 / 2013

Transaction ID : SB21B-204186

Amount of Each Disbursement this Period

5.08

Full Name (Last, First, Middle Initial)

B. Production Solutions, Inc.

Mailing Address 1953 Gallows Road
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2013

Transaction ID : SB21B-203729

Amount of Each Disbursement this Period

1120.00

Full Name (Last, First, Middle Initial)

C. Blackbaud Merchant Services

Mailing Address 2000 Daniel Island Drive

City Charleston State SC Zip Code 29492

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2013

Transaction ID : SB21B-204189

Amount of Each Disbursement this Period

180.32

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

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

1305.40

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Action Mailers Attn: Mrs. Beth Worley

Mailing Address 90 Commerce Drive

City Aston State PA Zip Code 19014

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203748

Amount of Each Disbursement this Period

77084.60

Full Name (Last, First, Middle Initial)

B. Associated Press

Mailing Address 450 West 33rd Street

City New York City State NY Zip Code 10001

Purpose of Disbursement Graphics

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203750

Amount of Each Disbursement this Period

180.00

Full Name (Last, First, Middle Initial)

C. Blackbaud

Mailing Address PO Box 930256

City Atlanta State GA Zip Code 31193

Purpose of Disbursement Computer Programming

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203752

Amount of Each Disbursement this Period

31437.55

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

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

108702.15

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Blackmesh

Mailing Address 2465 J-17 Centreville Road

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203753

Amount of Each Disbursement this Period

1775.00

Full Name (Last, First, Middle Initial)

B. SaBrina Brown

Mailing Address 3730 5th St.

City North Beach State MD Zip Code 20714

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203754

Amount of Each Disbursement this Period

51.99

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. Comcast

Mailing Address 40 West Leeds Ave

City Pleasantville State NJ Zip Code 08232

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203754-10000

Amount of Each Disbursement this Period

51.99

[MEMO ITEM]
Memo Entry

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

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

1826.99

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Broadview Networks

Mailing Address P.O. Box 9242

City Uniondale State NY Zip Code 11555

Purpose of Disbursement Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203755

Amount of Each Disbursement this Period

1544.08

Full Name (Last, First, Middle Initial)

B. Morgan Cahn

Mailing Address 26688 Martinique Drive

City Orange Beach State AL Zip Code 36561

Purpose of Disbursement Consulting Fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203756

Amount of Each Disbursement this Period

800.00

Full Name (Last, First, Middle Initial)

C. Emily Campbell

Mailing Address 554 Halloran Springs Road

City Las Vegas State NV Zip Code 89148

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203757

Amount of Each Disbursement this Period

201.19

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

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

2545.27

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Care First Blue Cross Blue Sheild

Mailing Address PO Box 79749

City Baltimore State MD Zip Code 21279

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203759

Amount of Each Disbursement this Period

27528.00

Full Name (Last, First, Middle Initial)

B. Emma Chadband

Mailing Address 1363 Somerset PI NW

City Washington State DC Zip Code 20011

Purpose of Disbursement
Design/Graphics

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203760

Amount of Each Disbursement this Period

60.00

Full Name (Last, First, Middle Initial)

C. Gilbert & Wolfand

Mailing Address Suite 320
2201 Wisconsin Ave., NW

City Washington, State DC Zip Code 20007

Purpose of Disbursement
Accounting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203763

Amount of Each Disbursement this Period

10000.00

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

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

37588.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Iron Mountain

Mailing Address P O Box 27128

City New York State NY Zip Code 10087

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203764

Amount of Each Disbursement this Period

427.46

Full Name (Last, First, Middle Initial)

B. Jackson River

Mailing Address 2535 13th St NW #005

City Washington State DC Zip Code 20009

Purpose of Disbursement
Media -Generic Mail/TV/Radio

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203765

Amount of Each Disbursement this Period

7462.50

Full Name (Last, First, Middle Initial)

C. Jackson River

Mailing Address 2535 13th St NW #005

City Washington State DC Zip Code 20009

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203766

Amount of Each Disbursement this Period

3487.50

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

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

11377.46

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jackson River

Mailing Address 2535 13th St NW
#005

City Washington State DC Zip Code 20009

Purpose of Disbursement
Media -Generic Mail/TV/Radio

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203767

Amount of Each Disbursement this Period

5250.00

Full Name (Last, First, Middle Initial)

B. Jackson River

Mailing Address 2535 13th St NW
#005

City Washington State DC Zip Code 20009

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203768

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

C. Kos Media, LLC Attn: Will Rockafellow

Mailing Address 2930 Shattuck Ave #206

City Berkeley State CA Zip Code 94705

Purpose of Disbursement
Online Advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203769

Amount of Each Disbursement this Period

5500.00

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

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

10900.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Lisa McIntire

Mailing Address 1362 Valencia Street #12

City San Francisco State CA Zip Code 94110

Purpose of Disbursement
Copy Writer

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203771

Amount of Each Disbursement this Period

1725.00

Full Name (Last, First, Middle Initial)

B. Jessica McIntosh

Mailing Address 1700 Kalorama Road #404

City Washington State DC Zip Code 20009

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203772

Amount of Each Disbursement this Period

33.26

Full Name (Last, First, Middle Initial)

C. Jessica McIntosh

Mailing Address 1700 Kalorama Road #404

City Washington State DC Zip Code 20009

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203773

Amount of Each Disbursement this Period

30.00

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

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

1788.26

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NGP VAN, Inc

Mailing Address 1101 15th Street, NW
Ste 500

City Washington State DC Zip Code 20005

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-203775

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. NGP VAN, Inc

Mailing Address 1101 15th Street, NW
Ste 500

City Washington State DC Zip Code 20005

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-203776

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. NGP VAN, Inc

Mailing Address 1101 15th Street, NW
Ste 500

City Washington State DC Zip Code 20005

Purpose of Disbursement
Computer Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-203777

Amount of Each Disbursement this Period

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

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Pitney Bowes Global Financial Services LLC

Mailing Address PO Box 371887

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203778

Amount of Each Disbursement this Period

1211.58

Full Name (Last, First, Middle Initial)

B. Pollard & Associates, Inc.

Mailing Address One North Park Drive
Suite 104

City Hunt Valley State MD Zip Code 21030-1816

Purpose of Disbursement
Employment Pension/ 401(k)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203779

Amount of Each Disbursement this Period

1300.00

Full Name (Last, First, Middle Initial)

C. Production Solutions, Inc.

Mailing Address 1953 Gallows Road
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203781

Amount of Each Disbursement this Period

404.45

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

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

2916.03

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

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Production Solutions, Inc.

Mailing Address 1953 Gallows Road
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203782

Amount of Each Disbursement this Period

2	3	0	4	5
---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. GE Capital C/O RICOH USA PROGRAM

Mailing Address PO Box 41564

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement
Equipment Rental

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203783

Amount of Each Disbursement this Period

1	9	3	0	3	1
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Salesforce.com

Mailing Address PO Box 203141

City Dallas State TX Zip Code 75320

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203785

Amount of Each Disbursement this Period

2	8	5	0	0
---	---	---	---	---

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

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

2	4	4	6	2	6
---	---	---	---	---	---

2	4	4	6	2	6
---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Sarah Pierz

Mailing Address 309 M Street NW Apt B

City Washington State DC Zip Code 20001

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203791

Amount of Each Disbursement this Period

17.00

B. United Parcel Service

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203793

Amount of Each Disbursement this Period

284.99

C. United Parcel Service

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203794

Amount of Each Disbursement this Period

41.61

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

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

343.60

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. United Parcel Service

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203795

Amount of Each Disbursement this Period

35.82

Full Name (Last, First, Middle Initial)

B. United Parcel Service

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203797

Amount of Each Disbursement this Period

39.68

Full Name (Last, First, Middle Initial)

C. United Parcel Service

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : SB21B-203798

Amount of Each Disbursement this Period

61.85

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

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

137.35

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Working Assets Long Distance

Mailing Address PO Box 480011

City Atlanta State GA Zip Code 30346

Purpose of Disbursement Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : **SB21B-203799**

Amount of Each Disbursement this Period

28.80

Full Name (Last, First, Middle Initial)

B. Working Assets Long Distance

Mailing Address PO Box 480011

City Atlanta State GA Zip Code 30346

Purpose of Disbursement Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : **SB21B-203800**

Amount of Each Disbursement this Period

378.23

Full Name (Last, First, Middle Initial)

C. 76 Words

Mailing Address 1720 I Street NW #550

City Washington State DC Zip Code 20006

Purpose of Disbursement Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2013

Transaction ID : **SB21B-203801**

Amount of Each Disbursement this Period

1000.00

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

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

1407.03

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. 76 Words

Mailing Address 1720 I Street NW
#550

City Washington State DC Zip Code 20006

Purpose of Disbursement
Printing

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
01 / 10 / 2013

Transaction ID : SB21B-203802

Amount of Each Disbursement this Period

7388.68

Full Name (Last, First, Middle Initial)

B. Discovery Benefits, Inc.

Mailing Address 3216 13th Avenue South

City Fargo State ND Zip Code 58103

Purpose of Disbursement
Insurance Health/Life

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
01 / 10 / 2013

Transaction ID : SB21B-204193

Amount of Each Disbursement this Period

68.25

Full Name (Last, First, Middle Initial)

C. First Data Merchant Services

Mailing Address PO Box 6010

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement
Credit Card Service Charges

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
01 / 13 / 2013

Transaction ID : SB21B-204183

Amount of Each Disbursement this Period

21871.73

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

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

29328.66

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address 730 15th Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2013

Transaction ID : SB21B-204197

Amount of Each Disbursement this Period

1586.82

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 401 N Washington St
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement
Taxes - Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203985

Amount of Each Disbursement this Period

48878.87

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 401 N Washington St
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement
Taxes - Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203986

Amount of Each Disbursement this Period

17204.15

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

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

67669.84

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Discovery Benefits, Inc.

Mailing Address 3216 13th Avenue South

City Fargo State ND Zip Code 58103

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-204200

Amount of Each Disbursement this Period

932.45

Category/
Type

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-204187

Amount of Each Disbursement this Period

7.82

Category/
Type

Full Name (Last, First, Middle Initial)

C. Kimberly Coleman

Mailing Address 1428 Perry Place NW

City Washington State DC Zip Code 20010

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203936

Amount of Each Disbursement this Period

1738.69

Category/
Type

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

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

2678.96

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Caroline Fines

Mailing Address 10621 Regent Park Court

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203937

Amount of Each Disbursement this Period

2344.61

Category/
Type

Full Name (Last, First, Middle Initial)

B. Amy Dacey

Mailing Address 4200 Cathedral Ave., NW #718

City Washington State DC Zip Code 20016

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203938

Amount of Each Disbursement this Period

4764.09

Category/
Type

Full Name (Last, First, Middle Initial)

C. Megan Giles

Mailing Address 1055 5th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203939

Amount of Each Disbursement this Period

1706.61

Category/
Type

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

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

8815.31

**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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Lindsay Hicks

Mailing Address 955 South Columbus Street
#120

City Arlington State VA Zip Code 22204

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203940

Amount of Each Disbursement this Period

1075.64

Full Name (Last, First, Middle Initial)

B. Ellen R Malcolm

Mailing Address 5060 Linnean Avenue, NW

City Washington, State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203941

Amount of Each Disbursement this Period

991.51

Full Name (Last, First, Middle Initial)

C. Stephanie Schriock

Mailing Address 3225 Valley Drive

City Alexandria State VA Zip Code 22302

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203942

Amount of Each Disbursement this Period

5997.78

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

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

8064.93

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Sooraj Mathew

Mailing Address 800 John Carlyle Street
#322

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Salaries

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
0	1		1	5		2	0	1	3

Transaction ID : SB21B-203943

Amount of Each Disbursement this Period

2	0	2	8	.	3	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Melanie Smith

Mailing Address 2100 Connecticut Ave, NW
Apartment 609

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

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
0	1		1	5		2	0	1	3

Transaction ID : SB21B-203944

Amount of Each Disbursement this Period

9	5	5	.	2	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Nicole Vance

Mailing Address 1302 Massachusetts Avenue, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Salaries

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
0	1		1	5		2	0	1	3

Transaction ID : SB21B-203945

Amount of Each Disbursement this Period

1	9	7	.	0	7	9
---	---	---	---	---	---	---

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

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

4	9	5	.	2	9
---	---	---	---	---	---

4	9	5	.	2	9
---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Hilary Wallington

Mailing Address 722 12th Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203946

Amount of Each Disbursement this Period

961.70

Full Name (Last, First, Middle Initial)

B. Emily Beardsley

Mailing Address 1776 Lanier Place NW #5C

City Washington State DC Zip Code 20009

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203947

Amount of Each Disbursement this Period

1368.73

Full Name (Last, First, Middle Initial)

C. Erica Best

Mailing Address 221 Seaton Place, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203948

Amount of Each Disbursement this Period

972.45

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

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

3302.88

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Lizzie Cooper

Mailing Address 945 Route 35

City Cross River State NY Zip Code 10518

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203949

Amount of Each Disbursement this Period

2897.84

Full Name (Last, First, Middle Initial)

B. Louisa Whitney

Mailing Address 1701 16th Street NW
Apartment 721

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203950

Amount of Each Disbursement this Period

2828.77

Full Name (Last, First, Middle Initial)

C. Lisa Kurdziel

Mailing Address 1301 U St NW
Apt 627

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203951

Amount of Each Disbursement this Period

2454.81

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

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

8181.42

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Kali Murphy

Mailing Address 461 N Thomas Street
Apt 407

City Arlington State VA Zip Code 22203

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203952

Amount of Each Disbursement this Period

962.70

Category/
Type

Full Name (Last, First, Middle Initial)

B. Michelle Ortiz

Mailing Address 2801 Turk Blvd #306

City San Francisco State CA Zip Code 94118

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203953

Amount of Each Disbursement this Period

2711.60

Category/
Type

Full Name (Last, First, Middle Initial)

C. Andrea Pagano Reyes

Mailing Address 4501 Connecticut Ave, NW #723

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203954

Amount of Each Disbursement this Period

2341.99

Category/
Type

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

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

6016.29

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Pat Reyes

Mailing Address 2601 Glenview Rd

City State Zip Code
Glenview IL 60025

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203955

Amount of Each Disbursement this Period

2859.78

Full Name (Last, First, Middle Initial)

B. Amalia Stott

Mailing Address 10137 Crestberry Place

City State Zip Code
Bethesda MD 20817

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203956

Amount of Each Disbursement this Period

4542.58

Full Name (Last, First, Middle Initial)

C. Marissa Strickfaden

Mailing Address 1100 First Street, SE
Apt 511

City State Zip Code
Washington DC 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203957

Amount of Each Disbursement this Period

1425.78

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

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

8828.14

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jennifer Addison

Mailing Address 1611 Maddux Lane

City McLean State VA Zip Code 22101

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203958

Amount of Each Disbursement this Period

976.40

Full Name (Last, First, Middle Initial)

B. Emily Lockwood

Mailing Address 1275 S. Corona Street

City Denver State CO Zip Code 80210

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203959

Amount of Each Disbursement this Period

2711.29

Full Name (Last, First, Middle Initial)

C. Alison McQuade

Mailing Address 320 23rd Street South
#1526

City Arlington State VA Zip Code 22202

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203960

Amount of Each Disbursement this Period

1765.04

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

5452.73

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Ryan Sims

Mailing Address 730 Newton Place, NW, #2

City Washington State DC Zip Code 20010

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203961

Amount of Each Disbursement this Period

1475.23

Full Name (Last, First, Middle Initial)

B. Sean Wagman

Mailing Address 4107 Connecticut Avenue, NW
#408

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203962

Amount of Each Disbursement this Period

1411.86

Full Name (Last, First, Middle Initial)

C. Catherine Loeffelman

Mailing Address 1811 Wyoming Ave. NW.
Apt 1

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203963

Amount of Each Disbursement this Period

1965.49

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

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

4852.58

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Priyanka Mantha

Mailing Address 3314 Mt. Pleasant St NW
Apt 37

City Washington State DC Zip Code 20010

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	15	/	2013

Transaction ID : SB21B-203964

Amount of Each Disbursement this Period

1197.22

Full Name (Last, First, Middle Initial)

B. Jessica Mcintosh

Mailing Address 1700 Kalorama Road
#404

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	15	/	2013

Transaction ID : SB21B-203965

Amount of Each Disbursement this Period

2298.79

Full Name (Last, First, Middle Initial)

C. Sarah Pierz

Mailing Address 309 M Street NW Apt B

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	15	/	2013

Transaction ID : SB21B-203966

Amount of Each Disbursement this Period

1015.80

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

4511.81

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jessica Byrd

Mailing Address 309 M Street, NW
Apt B

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203967

Amount of Each Disbursement this Period

1133.51

Category/
Type

Full Name (Last, First, Middle Initial)

B. Emily Campbell

Mailing Address 554 Halloran Springs Road

City Las Vegas State NV Zip Code 89148

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203968

Amount of Each Disbursement this Period

2280.51

Category/
Type

Full Name (Last, First, Middle Initial)

C. Peggy Egan

Mailing Address 20518 East Shore, Hwy 35

City Bigfork State MT Zip Code 59911

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203969

Amount of Each Disbursement this Period

2417.85

Category/
Type

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

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

5831.87

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Heather Kashner

Mailing Address 13 Salmon Run

City Camden State ME Zip Code 04843

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

01 / 15 / 2013

Transaction ID : SB21B-203970

Amount of Each Disbursement this Period

2740.46

Full Name (Last, First, Middle Initial)

B. Jonathan Parker

Mailing Address 1611 Hobart Street NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

01 / 15 / 2013

Transaction ID : SB21B-203971

Amount of Each Disbursement this Period

3912.40

Full Name (Last, First, Middle Initial)

C. Julie Petrick

Mailing Address 834 11th Street, NE

City Washignton State DC Zip Code 20002

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

01 / 15 / 2013

Transaction ID : SB21B-203972

Amount of Each Disbursement this Period

2373.45

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

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

9026.31

**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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Katelyn Stoner

Mailing Address 929 7th Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203973

Amount of Each Disbursement this Period

947.44

Full Name (Last, First, Middle Initial)

B. Mary Jane Volk

Mailing Address 541 E. Nelson Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203974

Amount of Each Disbursement this Period

2520.89

Full Name (Last, First, Middle Initial)

C. Muthoni Wambu

Mailing Address 928 Stubblefield Lane

City Baltimore State MD Zip Code 21202

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203975

Amount of Each Disbursement this Period

2636.81

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

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

6105.14

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Denise Feriozzi

Mailing Address 1678 A Euclid St. NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203976

Amount of Each Disbursement this Period

2907.06

Full Name (Last, First, Middle Initial)

B. Samuel Nitz

Mailing Address 1200 N Street, NW #608

City Washington State DC Zip Code 20005

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203977

Amount of Each Disbursement this Period

1887.08

Full Name (Last, First, Middle Initial)

C. Victoria Kempter

Mailing Address 2950 Van Ness St NW #125

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2013

Transaction ID : SB21B-203978

Amount of Each Disbursement this Period

938.00

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

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

5732.14

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Leigh Warren

Mailing Address 3109 Patrick Henry Drive
#623

City Falls Church State VA Zip Code 20444

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	1	3

Transaction ID : SB21B-203979

Amount of Each Disbursement this Period

2	4	7	8	.	4	3
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Yvonne Williams

Mailing Address 5412 Bradford Ct. #231

City Alexandria State VA Zip Code 22311

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	1	3

Transaction ID : SB21B-203980

Amount of Each Disbursement this Period

1	7	1	1	.	7	3
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. SaBrina Brown

Mailing Address 3730 5th St.

City North Beach State MD Zip Code 20714

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	1	3

Transaction ID : SB21B-203981

Amount of Each Disbursement this Period

3	2	2	3	.	9	3
---	---	---	---	---	---	---

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

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

7	4	1	4	.	0	9
---	---	---	---	---	---	---

7	4	1	4	.	0	9
---	---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Lesbia Cajchun

Mailing Address 2902 Kings Chapel Rd, #7

City Falls Church State VA Zip Code 22042

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-203982

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Ray Keating

Mailing Address 816 Lucky Rd

City Severn State MD Zip Code 21144

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-203983

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Jen Bluestein Lamb

Mailing Address 5617 N. 23rd Street

City Arlington State VA Zip Code 22205

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-203984

Amount of Each Disbursement this Period

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

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. John Hancock c/o City Bank Delaware

Mailing Address 1615 Brett Road Lock Box 7122

City State Zip Code
New Castle DE 19720

Purpose of Disbursement
Employment Pension/ 401(k)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 16 / 2013

Transaction ID : **SB21B-203987**

Amount of Each Disbursement this Period

10220.70

Full Name (Last, First, Middle Initial)

B. Blackbaud Merchant Services

Mailing Address 2000 Daniel Island Drive

City State Zip Code
Charleston SC 29492

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 16 / 2013

Transaction ID : **SB21B-204190**

Amount of Each Disbursement this Period

351.79

Full Name (Last, First, Middle Initial)

C. Aramark Refreshment Services

Mailing Address PO Box 415758

City State Zip Code
Boston MA 02241

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : **SB21B-203840**

Amount of Each Disbursement this Period

98.31

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

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

10670.80

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Action Without Borders, Inc.

Mailing Address 302 5th Avenue
Floor 11

City New York State NY Zip Code 10001

Purpose of Disbursement
Employee Recruitment

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : **SB21B-203841**

Amount of Each Disbursement this Period

70.00

Full Name (Last, First, Middle Initial)

B. Blackbaud

Mailing Address PO Box 930256

City Atlanta State GA Zip Code 31193

Purpose of Disbursement
Data Management

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : **SB21B-203842**

Amount of Each Disbursement this Period

3837.20

Full Name (Last, First, Middle Initial)

C. Benjamin Office Supply

Mailing Address 760 East Gude Drive

City Rockville State MD Zip Code 20850

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : **SB21B-203843**

Amount of Each Disbursement this Period

17.38

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

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

3924.58

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Benjamin Office Supply

Mailing Address 760 East Gude Drive

City Rockville State MD Zip Code 20850

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203844

Amount of Each Disbursement this Period

92.95

Full Name (Last, First, Middle Initial)

B. Benjamin Office Supply

Mailing Address 760 East Gude Drive

City Rockville State MD Zip Code 20850

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203845

Amount of Each Disbursement this Period

46.42

Full Name (Last, First, Middle Initial)

C. Benjamin Office Supply

Mailing Address 760 East Gude Drive

City Rockville State MD Zip Code 20850

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203846

Amount of Each Disbursement this Period

299.07

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

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

438.44

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Colonial Parking, Inc.

Mailing Address 1050 Thomas Jefferson St., NW
#100

City Washington State DC Zip Code 20007

Purpose of Disbursement
Parking Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203852

Amount of Each Disbursement this Period

270.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. Colonial Parking, Inc.

Mailing Address 1050 Thomas Jefferson St., NW
#100

City Washington State DC Zip Code 20007

Purpose of Disbursement
Parking Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203853

Amount of Each Disbursement this Period

837.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. Deer ParkSpring Water Processing Center

Mailing Address P.O. Box 856192

City Louisville State KY Zip Code 40285

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203855

Amount of Each Disbursement this Period

184.19

Category/
Type

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

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

1291.19

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Engage, LLC

Mailing Address 550 Highland St
Suite 403

City Frederick State MD Zip Code 21701

Purpose of Disbursement
Contribution Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203856

Amount of Each Disbursement this Period

1	5	9	3	.	8	5
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Federal Express

Mailing Address P. O. Box 371461

City Pittsburg State PA Zip Code 15250-7461

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203857

Amount of Each Disbursement this Period

1	8	.	1	7
---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Federal Express

Mailing Address P. O. Box 371461

City Pittsburg State PA Zip Code 15250-7461

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203858

Amount of Each Disbursement this Period

2	7	.	0	0
---	---	---	---	---

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

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

1	6	3	9	.	0	2
---	---	---	---	---	---	---

1	6	3	9	.	0	2
---	---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. JIB Monitoring Center

Mailing Address 1120 Connecticut Avenue, NW
Suite 1200

City Washington State DC Zip Code 20036

Purpose of Disbursement
Building Utilities & Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203860

Amount of Each Disbursement this Period

236.40

Full Name (Last, First, Middle Initial)

B. JIB Monitoring Center

Mailing Address 1120 Connecticut Avenue, NW
Suite 1200

City Washington State DC Zip Code 20036

Purpose of Disbursement
Building Utilities & Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203861

Amount of Each Disbursement this Period

52.50

Full Name (Last, First, Middle Initial)

C. Ray Keating

Mailing Address 816 Lucky Rd

City Severn State MD Zip Code 21144

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203862

Amount of Each Disbursement this Period

39.99

See Attached Memo Entry

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

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

328.89

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 25505

City State Zip Code
Lehigh Valley PA 18002-5505

Purpose of Disbursement
Internet Services

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203862-10000

Amount of Each Disbursement this Period

3	9	.	9	9
---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Jessica Mcintosh

Mailing Address 1700 Kalorama Road
#404

City State Zip Code
Washington DC 20009

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203863

Amount of Each Disbursement this Period

2	2	.	0	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Mobile Commons, Inc

Mailing Address 55 Washington Street
Suite 453

City State Zip Code
Brooklyn NY 11201

Purpose of Disbursement
Internet Services

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203864

Amount of Each Disbursement this Period

6	0	0	0	.	0	0
---	---	---	---	---	---	---

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

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

6	0	2	2	.	0	0
---	---	---	---	---	---	---

6	0	2	2	.	0	0
---	---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Perkins Coie

Mailing Address 700 Thirteenth Street NW
Ste 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-203868

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Sedgwick Claims Management

Mailing Address 36392 Treasury Center

City Chicago State IL Zip Code 60694

Purpose of Disbursement
Insurance General

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-203871

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. TV Eyes Inc

Mailing Address 2150 Post Road

City Fairfield State CT Zip Code 06824

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-203873

Amount of Each Disbursement this Period

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

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. United Parcel Service

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203874

Amount of Each Disbursement this Period

36.88

Full Name (Last, First, Middle Initial)

B. United Parcel Service

Mailing Address P. O. Box 7247-0244

City Philadelphia State PA Zip Code 19170-0001

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203875

Amount of Each Disbursement this Period

63.12

Full Name (Last, First, Middle Initial)

C. Leigh Warren

Mailing Address 3109 Patrick Henry Drive
#623

City Falls Church State VA Zip Code 20444

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203877

Amount of Each Disbursement this Period

108.00

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

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

208.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P O BOX 360001

City State Zip Code
FT LAUDERDALE FL 33336

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203878

Amount of Each Disbursement this Period

8	1	.	7	9
---	---	---	---	---

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. THE PALM RESTAURANTD

Mailing Address 1225 19TH ST NW

City State Zip Code
WASHINGTON DC 20036-2459

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203878-10000

Amount of Each Disbursement this Period

8	1	.	7	9
---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P O BOX 360001

City State Zip Code
FT LAUDERDALE FL 33336

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203879

Amount of Each Disbursement this Period

2	8	.	9	5
---	---	---	---	---

See Attached Memo Entry

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

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

1	1	.	0	7	4
---	---	---	---	---	---

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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CVS 1841 01841

Mailing Address 2000 P ST NW

City WASHINGTON State DC Zip Code 20036-6964

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203879-10000

Amount of Each Disbursement this Period

84.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Ft. Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203880

Amount of Each Disbursement this Period

84.79

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. APW DETROIT A63

Mailing Address EDWARD MCNAMARA TERMINAL

City DETROIT State MI Zip Code 48242

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203880-10000

Amount of Each Disbursement this Period

84.79

[MEMO ITEM]
Memo Entry

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

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

84.79

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336-0001

Purpose of Disbursement
Parking Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203881

Amount of Each Disbursement this Period

4.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. ACE PARKING LOT #342

Mailing Address 123 N. FIFTH STREET

City State Zip Code
PHOENIX AZ 85004

Purpose of Disbursement
Parking Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203881-10000

Amount of Each Disbursement this Period

4.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336-0001

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203882

Amount of Each Disbursement this Period

2304.34

See Attached Memo Entry

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

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

2308.34

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CHES BAY ROASTING BW

Mailing Address 1302 BELT ST

City Baltimore State MD Zip Code 21230-4760

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203882-10000

Amount of Each Disbursement this Period

12.31

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CHES BAY ROASTING BW

Mailing Address 1302 BELT ST

City Baltimore State MD Zip Code 21230-4760

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203882-20000

Amount of Each Disbursement this Period

11.15

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GOGOAIR.COM

Mailing Address 303 S TECHNOLOGY CT

City Broomfield State IL Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203882-30000

Amount of Each Disbursement this Period

34.95

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. B K-CENTRAL LI335701		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address CENTRAL SERVICE BUILDING		Transaction ID : SB21B-203882-40000
City DETROIT	State MI	
Purpose of Disbursement Travel/Accommodation /Meals		Amount of Each Disbursement this Period 4.97
Candidate Name		[MEMO ITEM] Memo Entry
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:	Category/ Type	

Full Name (Last, First, Middle Initial) B. WESTIN BOOK CADILLAC		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 1114 WASHINGTON BLVD		Transaction ID : SB21B-203882-50000
City DETROIT	State MI	
Purpose of Disbursement Travel/Accommodation /Meals		Amount of Each Disbursement this Period 618.12
Candidate Name		[MEMO ITEM] Memo Entry
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:	Category/ Type	

Full Name (Last, First, Middle Initial) C. HERTZ CAR RENTAL		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address CREDIT BILLING BILLING		Transaction ID : SB21B-203882-60000
City DETROIT	State MI	
Purpose of Disbursement Travel/Accommodation /Meals		Amount of Each Disbursement this Period 277.94
Candidate Name		[MEMO ITEM] Memo Entry
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:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ROAST DETROIT

Mailing Address 1128 WASHINGTON BLVD

City State Zip Code
DETROIT MI 48226-1907

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203882-70000

Amount of Each Disbursement this Period

203.60

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Slapshot Bar and Gr

Mailing Address 27947 GROESBECK HWY

City State Zip Code
Detroit MI 48066-5221

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203882-80000

Amount of Each Disbursement this Period

6.34

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. BUDDY'S #104 0096

Mailing Address 31800 NORTHWESTERN HWY

City State Zip Code
FARMINGTON HI MI 48334-1664

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203882-90000

Amount of Each Disbursement this Period

33.58

[MEMO ITEM]
Memo Entry

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

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

0.00

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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. OTGMANAGEMENTTUCSON,

Mailing Address TUCSON INT'L AIRPORT

City JAMAICA State NY Zip Code 85756-6949

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203882-10000

Amount of Each Disbursement this Period

2	.	9	5
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. OTGMANAGEMENTTUCSON,

Mailing Address TUCSON INT'L AIRPORT

City JAMAICA State NY Zip Code 85756-6949

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203882-11000

Amount of Each Disbursement this Period

5	.	6	2
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. OTGMANAGEMENTTUCSON,

Mailing Address TUCSON INT'L AIRPORT

City JAMAICA State NY Zip Code 85756-6949

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203882-12000

Amount of Each Disbursement this Period

9	.	0	9
---	---	---	---

[MEMO ITEM]
Memo Entry

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

0	.	0	0
---	---	---	---

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

0	.	0	0
---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TROPPO 0090

Mailing Address 120 N WASHINGTON SQUARE

City LANSING State MI Zip Code 48933

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203882-130000

Amount of Each Disbursement this Period

39.77

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Ritz Carlton Dove Mo

Mailing Address 15000 N SECRET SPRINGS DR

City MARANA State AZ Zip Code 85658-4813

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203882-140000

Amount of Each Disbursement this Period

93.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Ritz Carlton Dove Mo

Mailing Address 15000 N SECRET SPRINGS DR

City MARANA State AZ Zip Code 85658-4813

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203882-150000

Amount of Each Disbursement this Period

76.40

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. MCDONALD'S F30586 00

Mailing Address 30528 LYON CENTER DR E

City NEW HUDSON State MI Zip Code 48165-8901

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203882-160000

Amount of Each Disbursement this Period

4	.	8	5
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AVIS RENT A CAR

Mailing Address SEND ALL MAIL TO

City PHOENIX State AZ Zip Code 11530

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203882-170000

Amount of Each Disbursement this Period

4	3	5	.	5	3
---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOB NOBS

Mailing Address 149 W MCDOWELL RD

City PHOENIX State AZ Zip Code 85003-1212

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203882-180000

Amount of Each Disbursement this Period

3	.	8	5
---	---	---	---

[MEMO ITEM]
Memo Entry

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

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

0	.	0	0
---	---	---	---

0	.	0	0
---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HOB NOBS

Mailing Address 149 W MCDOWELL RD

City PHOENIX State AZ Zip Code 85003-1212

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203882-190000

Amount of Each Disbursement this Period

11.98

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SHERATON PHOENIX DTW

Mailing Address 340 N 3RD ST

City PHOENIX State AZ Zip Code 85004

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203882-200000

Amount of Each Disbursement this Period

34.73

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. MARRIOTT MARRIOTT MA

Mailing Address 50 E ADAMS ST

City PHOENIX State AZ Zip Code 85004-2329

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203882-210000

Amount of Each Disbursement this Period

12.00

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. PIZZERIA BIANCO

Mailing Address 623 E. ADAMS STREET

City PHOENIX State AZ Zip Code 85004

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203882-220000

Amount of Each Disbursement this Period

57.10

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SHERATON PHOENIX DIN

Mailing Address 340 N 3RD ST

City PHOENIX State AZ Zip Code 85004

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203882-230000

Amount of Each Disbursement this Period

7.61

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. THE ARROGANT BUTCHER

Mailing Address SUITE 150

City PHOENIX State AZ Zip Code 85004

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203882-240000

Amount of Each Disbursement this Period

43.01

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DISTRICT AMERICAN KI

Mailing Address 340 N 3RD ST

City PHOENIX State AZ Zip Code 85004

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203882-250000

Amount of Each Disbursement this Period

74.85

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. FIRST WATCH RESTAURA

Mailing Address 61 W THOMAS RD

City PHOENIX State AZ Zip Code 85013-4403

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203882-260000

Amount of Each Disbursement this Period

27.25

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 60 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203882-270000

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]
Memo Entry

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. 1724 L ST AUBONPAIN

Mailing Address 1724 L ST NW

City WASHINGTON State DC Zip Code 20036-5406

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203882-280000

Amount of Each Disbursement this Period

20.81

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PANACHE RESTAURANT -

Mailing Address 1725 DESALES ST NW

City WASHINGTON State DC Zip Code 20036-4406

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203882-290000

Amount of Each Disbursement this Period

71.05

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PANACHE RESTAURANT -

Mailing Address 1725 DESALES ST NW

City WASHINGTON State DC Zip Code 20036-4406

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203882-300000

Amount of Each Disbursement this Period

39.83

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. AMTRAK

Mailing Address 60 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203882-310000

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address Po Box 360001

City Ft. Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203883

Amount of Each Disbursement this Period

365.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. LIVESTREAM

Mailing Address 111 8TH AVE

City NEW YORK State NY Zip Code 10011

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203883-10000

Amount of Each Disbursement this Period

350.00

[MEMO ITEM]
Memo Entry

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

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

365.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TWITTERCOUNTER.COM

Mailing Address SUBMISSIONS USD

City State Zip Code
AMSTERDAM 00000

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203883-20000

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address Po Box 360001

City State Zip Code
Ft. Lauderdale FL 33336-0001

Purpose of Disbursement
Meeting/Conference

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203884

Amount of Each Disbursement this Period

475.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. AMERICA VOTES

Mailing Address 1155 CONNECTICUT NW #600

City State Zip Code
WASHINGTON DC 20036

Purpose of Disbursement
Meeting/Conference

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203884-10000

Amount of Each Disbursement this Period

475.00

[MEMO ITEM]
Memo Entry

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

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

475.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address Po Box 360001

City Ft. Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203885

Amount of Each Disbursement this Period

614.88

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. SAFEWAY STORE 28

Mailing Address 6118 ARLINGTON BLVD

City FALLS CHURCH State VA Zip Code 22044-2901

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203885-10000

Amount of Each Disbursement this Period

318.45

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. BJ S WHOLESALE CLUB

Mailing Address 66007 WILSON BLVD

City FALLS CHURCH State VA Zip Code 22044

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203885-20000

Amount of Each Disbursement this Period

112.03

[MEMO ITEM]
Memo Entry

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

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

614.88

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TARGET T1431 1431

Mailing Address 6100 ARLINGTON BLVD

City Falls Church State VA Zip Code 22044-2901

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203885-30000

Amount of Each Disbursement this Period

29.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. TARGET T1431 1431

Mailing Address 6100 ARLINGTON BLVD

City Falls Church State VA Zip Code 22044-2901

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203885-40000

Amount of Each Disbursement this Period

155.40

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address Po Box 360001

City Ft. Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203886

Amount of Each Disbursement this Period

4604.39

See Attached Memo Entry

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

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

4604.39

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. COSTCO #2

Mailing Address 999 LAKE DR

City Issaquah State WA Zip Code 98027-5367

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203886-10000

Amount of Each Disbursement this Period

110.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. LEXIS NEXIS

Mailing Address 9393 SPRINGBORO PIKE

City Miamisburg State OH Zip Code 45342-4424

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203886-20000

Amount of Each Disbursement this Period

4477.44

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. EFAX PLUS SERVICE

Mailing Address 6922 HOLLYWOOD BLVD

City Los Angeles State CA Zip Code 90028-6129

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203886-30000

Amount of Each Disbursement this Period

16.95

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address Po Box 360001

City Ft. Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Local Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203887

Amount of Each Disbursement this Period

1435.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. WMATA TREASURER SB

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203887-10000

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. WMATA TREASURER SB

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203887-20000

Amount of Each Disbursement this Period

230.00

[MEMO ITEM]
Memo Entry

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

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

1435.00

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WMATA TREASURER SB

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203887-30000

Amount of Each Disbursement this Period

245.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WMATA TREASURER SB

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203887-40000

Amount of Each Disbursement this Period

185.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. WMATA TREASURER SB

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203887-50000

Amount of Each Disbursement this Period

115.00

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WMATA TREASURER SB

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203887-60000

Amount of Each Disbursement this Period

55.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WMATA TREASURER SB

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203887-70000

Amount of Each Disbursement this Period

80.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. WMATA TREASURER SB

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203887-80000

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WMATA TREASURER SB

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Salaries

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
01 / 17 / 2013

Transaction ID : SB21B-203887-90000

Amount of Each Disbursement this Period

60.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WMATA TREASURER SB

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Salaries

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
01 / 17 / 2013

Transaction ID : SB21B-203887-10000

Amount of Each Disbursement this Period

115.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address Po Box 360001

City Ft. Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Telephone

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
01 / 17 / 2013

Transaction ID : SB21B-203888

Amount of Each Disbursement this Period

5227.98

See Attached Memo Entry

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

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

5227.98

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VERIZONWRLSSAPO VE

Mailing Address 255 PARKSHORE DR

City Folsom State NJ Zip Code 95630-4716

Purpose of Disbursement Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203888-10000

Amount of Each Disbursement this Period

3219.28

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ATT BUS PHONE PMT

Mailing Address 208 S AKARD ST

City DALLAS State TX Zip Code 75202-4209

Purpose of Disbursement Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203888-20000

Amount of Each Disbursement this Period

130.36

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ATTM*287022173021NBI

Mailing Address 12525 CINGULAR WAY

City ALPHARETTA State GA Zip Code 30004-8502

Purpose of Disbursement Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203888-30000

Amount of Each Disbursement this Period

1878.34

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address Po Box 360001

City Ft. Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		17		2013

Transaction ID : SB21B-203889

Amount of Each Disbursement this Period

584.32

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. FRONTIER AIRLINES

Mailing Address 7001 TOWER RD

City ATLANTA State GA Zip Code 80249-7312

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		17		2013

Transaction ID : SB21B-203889-10000

Amount of Each Disbursement this Period

135.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. FRONTIER AIRLINES

Mailing Address 7001 TOWER RD

City ATLANTA State GA Zip Code 80249-7312

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		17		2013

Transaction ID : SB21B-203889-20000

Amount of Each Disbursement this Period

125.80

[MEMO ITEM]
Memo Entry

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

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

584.32

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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. POTBELLY 021 5429298

Mailing Address 1900 L ST NW

City WASHINGTON State DC Zip Code 20036-5002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203889-30000

Amount of Each Disbursement this Period

18.21

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BARCODE 0095

Mailing Address 1101 17TH ST NW

City WASHINGTON State DC Zip Code 20036-4793

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203889-40000

Amount of Each Disbursement this Period

98.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. BARMY WINE & LIQUORS

Mailing Address 1912 L ST NW

City WASHINGTON State DC Zip Code 20036-5008

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203889-50000

Amount of Each Disbursement this Period

149.71

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ELEPHANT & CASTLE -

Mailing Address 900 19TH ST- EYE STREET

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203889-60000

Amount of Each Disbursement this Period

56.30

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Parking Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203890

Amount of Each Disbursement this Period

15.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. RRB/ITC PARKING 0000

Mailing Address 1300 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004-3002

Purpose of Disbursement
Parking Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203890-10000

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]
Memo Entry

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

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

15.00

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

Use separate schedule(s)
for each category of the
Detailed Summary 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City State Zip Code
Ft. Lauderdale FL 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		17		2013

Transaction ID : SB21B-203891

Amount of Each Disbursement this Period

394.63

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. PAYPAL *MIDWESTACAD

Mailing Address 2145 HAMILTON AVE

City State Zip Code
San Jose CA 95125-5905

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		17		2013

Transaction ID : SB21B-203891-10000

Amount of Each Disbursement this Period

200.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PANACHE RESTAURANT -

Mailing Address 1725 DESALES ST NW

City State Zip Code
WASHINGTON DC 20036-4406

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		17		2013

Transaction ID : SB21B-203891-20000

Amount of Each Disbursement this Period

73.33

[MEMO ITEM]
Memo Entry

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

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

394.63

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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Renaissance9671NMAYF		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 1127 CONNECTICUT AVE NW		Transaction ID : SB21B-203891-30000
City WASHINGTON	State DC	
Zip Code 20036-4301	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 65.00
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
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:		

Full Name (Last, First, Middle Initial) B. BISTRO BIS BISTRO BI		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 15 E ST NW		Transaction ID : SB21B-203891-40000
City WASHINGTON	State DC	
Zip Code 20001-1706	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 56.30
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
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:		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address P.O. Box 360001		Transaction ID : SB21B-203892
City Fort Lauderdale	State FL	
Zip Code 33336	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 2705.07
Candidate Name	Category/Type	See Attached Memo Entry
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:		

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

2705.07

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HOTEL HELIX 0565

Mailing Address 1430 RHODE ISLAND AVE NW

City WASHINGTON State DC Zip Code 20005-5401

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203892-10000

Amount of Each Disbursement this Period

2705.07

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203893

Amount of Each Disbursement this Period

9.95

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. BOINGO WIRELESS

Mailing Address 10960 WILSHIRE BLVD

City Los Angeles State CA Zip Code 90024-3711

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203893-10000

Amount of Each Disbursement this Period

9.95

[MEMO ITEM]
Memo Entry

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

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

9.95

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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203894

Amount of Each Disbursement this Period

92.34

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. NEW YORK TIMES DIGIT

Mailing Address 620 8TH AVE

City NEW YORK State NY Zip Code 10018-1604

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203894-10000

Amount of Each Disbursement this Period

15.90

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GNC*GLOBE DIGITAL

Mailing Address ATTN: JENNIFER PUTZBACH

City BOSTON State MA Zip Code 02125

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203894-20000

Amount of Each Disbursement this Period

15.96

[MEMO ITEM]
Memo Entry

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

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

92.34

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. JRN COMMUNICATIONS J

Mailing Address 333 W STATE ST

City MILWAUKEE State WI Zip Code 53203-1305

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203894-30000

Amount of Each Disbursement this Period

4.29

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. NEW YORK TIMES

Mailing Address 620 8TH AVE

City NEW YORK State NY Zip Code 10018-1604

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203894-40000

Amount of Each Disbursement this Period

43.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PRESS PLUS

Mailing Address 25 W 52ND ST

City NEW YORK State NY Zip Code 10019

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203894-50000

Amount of Each Disbursement this Period

12.99

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City State Zip Code
Fort Lauderdale FL 33336

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203895

Amount of Each Disbursement this Period

1	0	3	0	8	7
---	---	---	---	---	---

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. NMX*FRANKLN PROSPERI

Mailing Address 560 VILLAGE BLVD

City State Zip Code
Palm Beach FL 33409-1963

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203895-10000

Amount of Each Disbursement this Period

5	9	0	0
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. MORTON'S OF CONNECTI

Mailing Address 1050 CONNECTICUT AVE NW

City State Zip Code
WASHINGTON DC 20036-5303

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203895-20000

Amount of Each Disbursement this Period

2	4	7	9	6
---	---	---	---	---

[MEMO ITEM]
Memo Entry

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

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

1	0	3	0	8	7
---	---	---	---	---	---

1	0	3	0	8	7
---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. PAUL BAKERY # 204

Mailing Address 1000 CONNECTICUT AVE

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203895-30000

Amount of Each Disbursement this Period

16.78

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AMTRAK

Mailing Address 60 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203895-40000

Amount of Each Disbursement this Period

407.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. BOQUERIA DC 3 BOQUER

Mailing Address 1837 M ST NW

City WASHINGTON State DC Zip Code 20036-2523

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203895-50000

Amount of Each Disbursement this Period

85.50

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. KELLARI

Mailing Address 1700 K ST NW

City WASHINGTON State DC Zip Code 20006-3812

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203895-60000

Amount of Each Disbursement this Period

5	0	.	0	8
---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. MORTON'S OF CONNECTI

Mailing Address 1050 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20036-5303

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203895-70000

Amount of Each Disbursement this Period

7	6	.	8	5
---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. MORTON'S OF CONNECTI

Mailing Address 1050 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20036-5303

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203895-80000

Amount of Each Disbursement this Period

8	7	.	7	0
---	---	---	---	---

[MEMO ITEM]
Memo Entry

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

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

0	0	.	0	0
---	---	---	---	---

0	0	.	0	0
---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203896

Amount of Each Disbursement this Period

234.77

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. FEDEX OFFICE #0268 0

Mailing Address 600 3RD AVE

City NEW YORK State NY Zip Code 10016-1901

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203896-10000

Amount of Each Disbursement this Period

91.01

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STAPLES 01532

Mailing Address 1901 L ST NW

City WASHINGTON State DC Zip Code 20036-3509

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203896-20000

Amount of Each Disbursement this Period

37.13

[MEMO ITEM]
Memo Entry

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

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

234.77

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. STAPLES 01532

Mailing Address 1901 L ST NW

City WASHINGTON State DC Zip Code 20036-3509

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203896-30000

Amount of Each Disbursement this Period

106.63

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203897

Amount of Each Disbursement this Period

1280.85

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. MTA MVM*68TH ST / HU

Mailing Address 130 LIVINGSTON ST

City BROOKLYN State NY Zip Code 11201-5106

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203897-10000

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]
Memo Entry

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

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

1280.85

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HOTELS.COM US1111717

Mailing Address 333 108TH AVE NE

City Bellevue State NV Zip Code 98004-5736

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203897-20000

Amount of Each Disbursement this Period

125.63

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. MCDONALD'S F14726 00

Mailing Address 6007 HARBOUR PARK DR

City AMELIA State VA Zip Code 23112-2160

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203897-30000

Amount of Each Disbursement this Period

2.30

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UPPY'S #29 6904

Mailing Address 28100 TORCH PKWY

City AMELIA COURT State VA Zip Code 60555-3938

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203897-40000

Amount of Each Disbursement this Period

4.79

[MEMO ITEM]
Memo Entry

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. UPPY'S #29 6904

Mailing Address 28100 TORCH PKWY

City State Zip Code
AMELIA COURT VA 60555-3938

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-203897-50000

Amount of Each Disbursement this Period

2	3	.	4	6
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. NYC TAXI MED 3A27 09

Mailing Address 330 MCGUINNESS BLVD

City State Zip Code
BROOKLYN NY 11222-1820

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-203897-60000

Amount of Each Disbursement this Period

1	1	.	2	5
---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Starbucks #09721 Bro

Mailing Address HILLEL PLACE, BROOKLYN CO

City State Zip Code
Brooklyn NY 11210

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-203897-70000

Amount of Each Disbursement this Period

1	2	.	3	0
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[MEMO ITEM]
Memo Entry

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

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

0	0	0
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0	0	0
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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. NYC TAXI MED 2N15 09		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 3108 NORTHERN BLVD		Transaction ID : SB21B-203897-80000
City LONG ISLAND CITY	State NY	
Zip Code 11101-2818	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 9.60
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
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:		

Full Name (Last, First, Middle Initial) B. NYC-TAXI VERIFONE NY		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 3703 21ST ST		Transaction ID : SB21B-203897-90000
City LONG ISLAND CITY	State NY	
Zip Code 11101-3502	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 14.30
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
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:		

Full Name (Last, First, Middle Initial) C. CRADDOCK TERRY HOTEL		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 1312 COMMERCE ST		Transaction ID : SB21B-203897-100000
City LYNCHBURG	State VA	
Zip Code 24504-1804	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 154.60
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. WATERSTONE RESTAURAN

Mailing Address 1312 COMMERCE ST

City LYNCHBURG State VA Zip Code 24504-1804

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203897-110000

Amount of Each Disbursement this Period

3	3	.	8	2
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[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CHICKPEA

Mailing Address 33 AMTRACK LEVEL

City NEW YORK State NY Zip Code 10001

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203897-120000

Amount of Each Disbursement this Period

1	4	.	0	9
---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DUANE READE #14261 0

Mailing Address 630 3RD AVE

City NEW YORK State NY Zip Code 10017-6774

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203897-130000

Amount of Each Disbursement this Period

1	4	.	5	1
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[MEMO ITEM]
Memo Entry

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

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

0	0	0
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0	0	0
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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. ROSA MEXICANO 1 ROSA		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 9 E 18TH ST		Transaction ID : SB21B-203897-140000
City NEW YORK	State NY	
Zip Code 10003-1903	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 136.04
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
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:		

Full Name (Last, First, Middle Initial) B. Starbucks #08812 New		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 39TH & PARK		Transaction ID : SB21B-203897-150000
City New York	State NY	
Zip Code 10016	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 6.03
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
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:		

Full Name (Last, First, Middle Initial) C. DD/BR #343097 Q		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 567 3RD AVE		Transaction ID : SB21B-203897-160000
City NEW YORK	State NY	
Zip Code 10016-3169	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 2.82
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DUANE READE #14421 0

Mailing Address 127-137 8TH AVE

City NEW YORK State NY Zip Code 10011

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203897-170000

Amount of Each Disbursement this Period

13.91

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Starbucks #07342 New

Mailing Address 41ST & 3RD

City New York State NY Zip Code 10017

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203897-180000

Amount of Each Disbursement this Period

5.08

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Starbucks #07540 New

Mailing Address 17TH AND BROADWAY 41 UNI

City New York State NY Zip Code 10003

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203897-190000

Amount of Each Disbursement this Period

2.34

[MEMO ITEM]
Memo Entry

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

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

0.00

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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. THE WATERMELON POD 3

Mailing Address 145 E 39TH ST

City NEW YORK State NY Zip Code 10016-0913

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203897-200000

Amount of Each Disbursement this Period

15.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WHOLEFDS TRB 10245 0

Mailing Address 270 GREENWICH ST

City NEW YORK State NY Zip Code 10007-1150

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203897-210000

Amount of Each Disbursement this Period

11.76

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. MATSU FUSION RESTAUR

Mailing Address 411 E. 70TH STREET

City NEW YORK State NY Zip Code 10021

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203897-220000

Amount of Each Disbursement this Period

27.00

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. BAKERS CRUST CAFE 00

Mailing Address 11800 W BROAD ST

City RICHMOND State VA Zip Code 23233-1064

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203897-230000

Amount of Each Disbursement this Period

54.26

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. YELLOW CAB CO.OF DC

Mailing Address 1636 BLADENSBURG RD NE

City Wahington State DC Zip Code 20002-1804

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203897-240000

Amount of Each Disbursement this Period

12.59

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AVIS RENT A CAR

Mailing Address SEND ALL MAIL TO

City WASHINGTON State DC Zip Code 11530

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203897-250000

Amount of Each Disbursement this Period

216.92

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Starbucks #07281 Was

Mailing Address 1734 L STREET

City Washington State DC Zip Code 20036

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203897-260000

Amount of Each Disbursement this Period

9.08

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 1724 L ST AUBONPAIN

Mailing Address 1724 L ST NW

City WASHINGTON State DC Zip Code 20036-5406

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203897-270000

Amount of Each Disbursement this Period

9.54

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 60 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203897-280000

Amount of Each Disbursement this Period

41.00

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. JAMBA JUICE #1286 00

Mailing Address SPACE M133

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203897-290000

Amount of Each Disbursement this Period

6	.	5	9
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS CORP077594

Mailing Address 40 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002-4225

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203897-300000

Amount of Each Disbursement this Period

5	.	9	4
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AMTRAK

Mailing Address 60 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203897-310000

Amount of Each Disbursement this Period

2	5	8	.	0	0
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[MEMO ITEM]
Memo Entry

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

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

0	.	0	0
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0	.	0	0
---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TAXI CREDIT CARD COR

Mailing Address 5411 QUEENS BLVD

City State Zip Code
WOODSIDE NY 11377-4642

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203897-320000

Amount of Each Disbursement this Period

15.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City State Zip Code
Fort Lauderdale FL 33336

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203899

Amount of Each Disbursement this Period

83.69

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. DLX FOR BUSINESS 000

Mailing Address 3680 VICTORIA ST N

City State Zip Code
SHOREVIEW MN 55126-2906

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203899-10000

Amount of Each Disbursement this Period

83.69

[MEMO ITEM]
Memo Entry

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

83.69

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203900

Amount of Each Disbursement this Period

7	9	9	.	0	0
---	---	---	---	---	---

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. DUN & BRADSTREET Dun

Mailing Address 22761 PACIFIC COAST HWY

City MALIBU State CA Zip Code 90265-5064

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203900-10000

Amount of Each Disbursement this Period

7	9	9	.	0	0
---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Publication & Dues

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203901

Amount of Each Disbursement this Period

5	0	0	.	0	0
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See Attached Memo Entry

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

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

1	2	9	.	9	0
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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Democratic GAIN - Ju		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 888 16TH ST NW		Transaction ID : SB21B-203901-10000
City Washington	State DC	
Purpose of Disbursement Publication & Dues	Candidate Name	Amount of Each Disbursement this Period 500.00
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:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address PO Box 360001		Transaction ID : SB21B-203902
City Fort Lauderdale	State FL	
Purpose of Disbursement Travel/Accommodation /Meals	Candidate Name	Amount of Each Disbursement this Period 4457.27
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:		

Full Name (Last, First, Middle Initial) C. SHERATON PHOENIX DTW		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 340 N 3RD ST		Transaction ID : SB21B-203902-10000
City PHOENIX	State AZ	
Purpose of Disbursement Travel/Accommodation /Meals	Candidate Name	Amount of Each Disbursement this Period 314.89
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	4457.27
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address AMERICAN AIRLINES-CCS

City DALLAS State TX Zip Code 74133

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203902-20000

Amount of Each Disbursement this Period

401.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. VAPIANO 882901909720

Mailing Address 1800 M ST NW

City WASHINGTON State DC Zip Code 20036-5802

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203902-30000

Amount of Each Disbursement this Period

41.04

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DELTA AIR LINES INC.

Mailing Address ATLANTA AIRPORT

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203902-40000

Amount of Each Disbursement this Period

188.80

[MEMO ITEM]
Memo Entry

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. US AIRWAYS INC.

Mailing Address 4000 E SKY HARBOR BLVD

City ATLANTA State GA Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203902-50000

Amount of Each Disbursement this Period

243.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203902-60000

Amount of Each Disbursement this Period

353.60

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address AMERICAN AIRLINES-CCS

City DALLAS State TX Zip Code 74133

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203902-70000

Amount of Each Disbursement this Period

412.60

[MEMO ITEM]
Memo Entry

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

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

0.00

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E

City State Zip Code
JETBLUE NY 84121-6945

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
01 / 17 / 2013

Transaction ID : SB21B-203902-80000

Amount of Each Disbursement this Period

174.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E

City State Zip Code
JETBLUE NY 84121-6945

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
01 / 17 / 2013

Transaction ID : SB21B-203902-90000

Amount of Each Disbursement this Period

259.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City State Zip Code
ATLANTA GA 30344

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
01 / 17 / 2013

Transaction ID : SB21B-203902-100000

Amount of Each Disbursement this Period

19.00

[MEMO ITEM]
Memo Entry

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DELTA AIR LINES

Mailing Address DEPT 680 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203902-110000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HOTELS.COM US1113364

Mailing Address 333 108TH AVE NE

City Bellevue State NV Zip Code 98004-5736

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203902-120000

Amount of Each Disbursement this Period

547.68

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203902-130000

Amount of Each Disbursement this Period

305.60

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-203902-140000

Amount of Each Disbursement this Period

4	2	5	.	6	0
---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ALASKA AIRLINES INC.

Mailing Address 20833 INTERNATIONAL BLVD

City SEATTLE State WA Zip Code 98198-5950

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-203902-150000

Amount of Each Disbursement this Period

2	9	0	.	8	0
---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOTELS.COM US1113396

Mailing Address 333 108TH AVE NE

City Bellevue State NV Zip Code 98004-5736

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-203902-160000

Amount of Each Disbursement this Period

2	2	6	.	4	6
---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

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

0	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

0	0	0	.	0	0
---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203902-170000

Amount of Each Disbursement this Period

99.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State GA Zip Code 30344

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203902-180000

Amount of Each Disbursement this Period

126.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Employee Training/ Planning

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203907

Amount of Each Disbursement this Period

25.00

See Attached Memo Entry

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

25.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. LYNDA.COM 0082

Mailing Address 6410 VIA REAL

City State Zip Code
CARPINTERIA CA 93013-2925

Purpose of Disbursement
Employee Training/ Planning

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203907-10000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 360001

City State Zip Code
Fort Lauderdale FL 33336

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203908

Amount of Each Disbursement this Period

14.09

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. STAPLES 01532

Mailing Address 1901 L ST NW

City State Zip Code
WASHINGTON DC 20036-3509

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203908-10000

Amount of Each Disbursement this Period

14.09

[MEMO ITEM]
Memo Entry

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

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

14.09

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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203909

Amount of Each Disbursement this Period

270.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. USPS 104965029920825

Mailing Address 900 BRENTWOOD RD NE

City WASHINGTON State DC Zip Code 20066-9201

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203909-10000

Amount of Each Disbursement this Period

45.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. USPS 104965029920825

Mailing Address 900 BRENTWOOD RD NE

City WASHINGTON State DC Zip Code 20066-9201

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203909-20000

Amount of Each Disbursement this Period

225.00

[MEMO ITEM]
Memo Entry

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

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

270.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203910

Amount of Each Disbursement this Period

1	4	3	.	9	8
---	---	---	---	---	---

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. CORNER BAKERY

Mailing Address 1828 L ST NW

City WASHINGTON State DC Zip Code 20036-5123

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203910-10000

Amount of Each Disbursement this Period

6	0	.	6	4
---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Starbucks #07281 Was

Mailing Address 1734 L STREET

City Washington State DC Zip Code 20036

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203910-20000

Amount of Each Disbursement this Period

4	6	.	1	5
---	---	---	---	---

[MEMO ITEM]
Memo Entry

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

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

1	4	3	.	9	8
---	---	---	---	---	---

1	4	3	.	9	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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. MAI THAI 65000000410		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 1200 19TH ST NW		Transaction ID : SB21B-203910-30000
City WASHINGTON	State DC	
Zip Code 20036-2412	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 37.19
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
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:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address PO Box 360001		Transaction ID : SB21B-203914
City Fort Lauderdale	State FL	
Zip Code 33336	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 2468.64
Candidate Name	Category/ Type	See Attached Memo Entry
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:		

Full Name (Last, First, Middle Initial) C. LIRRNYTICKETS		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 14601 ARCHER AVE		Transaction ID : SB21B-203914-10000
City JAMAICA	State NY	
Zip Code 11435-4311	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 6.25
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	2468.64
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. LIRRNITICKETS

Mailing Address 14601 ARCHER AVE

City State Zip Code
JAMAICA NY 11435-4311

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203914-20000

Amount of Each Disbursement this Period

6.25

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. LIRRNITICKETS

Mailing Address 14601 ARCHER AVE

City State Zip Code
JAMAICA NY 11435-4311

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203914-30000

Amount of Each Disbursement this Period

26.25

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOTELS.COM US1112291

Mailing Address 333 108TH AVE NE

City State Zip Code
Bellevue NV 98004-5736

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203914-40000

Amount of Each Disbursement this Period

204.69

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HOTELS.COM US1112179

Mailing Address 333 108TH AVE NE

City Bellevue State NV Zip Code 98004-5736

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-203914-50000

Amount of Each Disbursement this Period

5	8	9	.	6	2
---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. GOGOAIR.COM

Mailing Address 303 S TECHNOLOGY CT

City Broomfield State IL Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-203914-60000

Amount of Each Disbursement this Period

4	.	0	0
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ALAMO RENT A CAR TOL

Mailing Address 9 PARK PLACE

City Great Neck State NY Zip Code 11021

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-203914-70000

Amount of Each Disbursement this Period

3	.	5	0
---	---	---	---

[MEMO ITEM]
Memo Entry

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

0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. LEAN N GREEN GOURMET

Mailing Address 300 TERMINAL C (LOGAN)

City BOSTON State MA Zip Code 02128

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203914-80000

Amount of Each Disbursement this Period

11.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Hilton Bstn Logan Ai

Mailing Address 1 HOTEL DR

City Boston State MA Zip Code 02128-5500

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203914-90000

Amount of Each Disbursement this Period

71.05

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. NYC TAXI MED 4K76 09

Mailing Address 465 UTICA AVE

City BROOKLYN State NY Zip Code 11203-1318

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203914-100000

Amount of Each Disbursement this Period

23.75

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NYC TAXI MED 7P32 09

Mailing Address 374 4TH AVE

City State Zip Code
BROOKLYN NY 11215-2718

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203914-110000

Amount of Each Disbursement this Period

9	.	6	0
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS C PI321503

Mailing Address TERMINAL B

City State Zip Code
EAST BOSTON MA 02128

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203914-120000

Amount of Each Disbursement this Period

7	.	2	8
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ALAMO CAR RENTAL

Mailing Address BOSTON INTL ARPT

City State Zip Code
EAST BOSTON MA 02128

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203914-130000

Amount of Each Disbursement this Period

4	0	.	6	7
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[MEMO ITEM]
Memo Entry

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

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

0	.	0	0
---	---	---	---

0	.	0	0
---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. LEGAL SEAFOOD #019

Mailing Address TERMINAL C LOGAN INT'L

City EAST BOSTON State MA Zip Code 02128

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203914-140000

Amount of Each Disbursement this Period

29.02

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. LOGAN AIRPORT GULF #

Mailing Address 100 CROSSING BLVD

City EAST BOSTON State MA Zip Code 01702-5401

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203914-150000

Amount of Each Disbursement this Period

23.08

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS C PI321503

Mailing Address TERMINAL B

City EAST BOSTON State MA Zip Code 02128

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203914-160000

Amount of Each Disbursement this Period

9.14

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. HYANNIS AIR SERIVCE,		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address BARNSTABLE MUNICIPAL AIRP		Transaction ID : SB21B-203914-170000
City HYANNIS	State MA	
Zip Code 02601	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 679.00
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
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:		

Full Name (Last, First, Middle Initial) B. OTG JFK T5 VENTURE,		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 5 CENTRAL TERMINAL AREA		Transaction ID : SB21B-203914-180000
City JAMAICA	State NY	
Zip Code 11430-1906	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 5.44
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
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:		

Full Name (Last, First, Middle Initial) C. OTG JFK T5 VENTURE,		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 5 CENTRAL TERMINAL AREA		Transaction ID : SB21B-203914-190000
City JAMAICA	State NY	
Zip Code 11430-1906	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 33.54
Candidate Name	Category/Type	[MEMO ITEM] Memo Entry
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NYC TAXI MED 1C53 09

Mailing Address 3606 STEINWAY ST

City State Zip Code
LONG ISLAND CITY NY 11101-1512

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203914-200000

Amount of Each Disbursement this Period

11.87

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ALL TAXI MANAGEMENT

Mailing Address 4125 36TH ST

City State Zip Code
LONG ISLAND CITY NY 11101-1701

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203914-210000

Amount of Each Disbursement this Period

6.75

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ALL TAXI MANAGEMENT

Mailing Address 4125 36TH ST

City State Zip Code
LONG ISLAND CITY NY 11101-1701

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203914-220000

Amount of Each Disbursement this Period

6.75

[MEMO ITEM]
Memo Entry

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

0.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. QUEENS MEDALLION LSN

Mailing Address 2103 44TH AVE

City LONG ISLAND CITY State NY Zip Code 11101-5007

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203914-230000

Amount of Each Disbursement this Period

7	.	3	8
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BAKED DOWNTOWN CAFE

Mailing Address 1015 ELM ST

City MANCHESTER State NH Zip Code 03101

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203914-240000

Amount of Each Disbursement this Period

1	2	.	0	5
---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. NJT NY PENN STA 01

Mailing Address NEW YORK PENN STATION

City NEW YORK State NJ Zip Code 10016

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203914-250000

Amount of Each Disbursement this Period

1	2	.	5	0
---	---	---	---	---

[MEMO ITEM]
Memo Entry

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

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

0	.	0	0
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0	.	0	0
---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HUDSON NEWS 13 PENN

Mailing Address 8TH AVE -PENN STN TKT LVL

City NEW YORK State NY Zip Code 10001

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203914-260000

Amount of Each Disbursement this Period

5	.	9	7
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. GREY DOG CHELSEA 650

Mailing Address 242 W 16TH ST

City NEW YORK State NY Zip Code 10011-6110

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203914-270000

Amount of Each Disbursement this Period

1	7	.	2	0
---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GREY DOG CHELSEA 650

Mailing Address 242 W 16TH ST

City NEW YORK State NY Zip Code 10011-6110

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203914-280000

Amount of Each Disbursement this Period

1	1	.	3	2
---	---	---	---	---

[MEMO ITEM]
Memo Entry

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

0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

0	.	0	0
---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. MARKET TABLE

Mailing Address 54 CARMINE ST

City NEW YORK State NY Zip Code 10014-4424

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		17		2013

Transaction ID : SB21B-203914-290000

Amount of Each Disbursement this Period

74.06

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ANNISA 0800800180900

Mailing Address 13 BARROW ST

City NEW YORK State NY Zip Code 10014-3823

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		17		2013

Transaction ID : SB21B-203914-300000

Amount of Each Disbursement this Period

129.79

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ALEXANDRA

Mailing Address 455 HUDSON ST FRNT A

City NEW YORK State NY Zip Code 10014-3708

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		17		2013

Transaction ID : SB21B-203914-310000

Amount of Each Disbursement this Period

70.25

[MEMO ITEM]
Memo Entry

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

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

0.00

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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. DUANE READE #14421 0		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 127-137 8TH AVE		Transaction ID : SB21B-203914-320000
City NEW YORK	State NY	
Zip Code 10011	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 7.55
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
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:		

Full Name (Last, First, Middle Initial) B. Starbucks #07540 New		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 17TH AND BROADWAY 41 UNI		Transaction ID : SB21B-203914-330000
City New York	State NY	
Zip Code 10003	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 5.66
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
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:		

Full Name (Last, First, Middle Initial) C. PARADIES # 690 Q		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 1001 WESTBROOK ST		Transaction ID : SB21B-203914-340000
City PORTLAND	State ME	
Zip Code 04102-1938	Purpose of Disbursement Travel/Accommodation /Meals	Amount of Each Disbursement this Period 5.01
Candidate Name	Category/ Type	[MEMO ITEM] Memo Entry
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. HUDSONNIA ROCHESTERJ		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 1200 BROOKS AVE		Transaction ID : SB21B-203914-350000
City ROCHESTER	State NY	
Purpose of Disbursement Travel/Accommodation /Meals		Amount of Each Disbursement this Period 10.67
Candidate Name		[MEMO ITEM] Memo Entry
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:	Category/ Type	

Full Name (Last, First, Middle Initial) B. HUDSONNIA ROCHESTERJ		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 1200 BROOKS AVE		Transaction ID : SB21B-203914-360000
City ROCHESTER	State NY	
Purpose of Disbursement Travel/Accommodation /Meals		Amount of Each Disbursement this Period 10.98
Candidate Name		[MEMO ITEM] Memo Entry
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:	Category/ Type	

Full Name (Last, First, Middle Initial) C. JETBLUE AIRWAYS		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 6322 S 3000 E		Transaction ID : SB21B-203914-370000
City TULSA	State OK	
Purpose of Disbursement Travel/Accommodation /Meals		Amount of Each Disbursement this Period 15.00
Candidate Name		[MEMO ITEM] Memo Entry
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:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. EINSTEIN BAGELS 0002

Mailing Address REAGAN WASHINGTON NATL A

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203914-380000

Amount of Each Disbursement this Period

10.12

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. TOPAZ BAR 0051

Mailing Address 1733 N ST NW

City WASHINGTON State DC Zip Code 20036-2801

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203914-390000

Amount of Each Disbursement this Period

36.36

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. TOPAZ-HOTEL 0072

Mailing Address 1733 N ST NW

City WASHINGTON State DC Zip Code 20036-2801

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203914-400000

Amount of Each Disbursement this Period

35.70

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. 1724 L ST AUBONPAIN

Mailing Address 1724 L ST NW

City WASHINGTON State DC Zip Code 20036-5406

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203914-410000

Amount of Each Disbursement this Period

1	1	.	8	5
---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 1724 L ST AUBONPAIN

Mailing Address 1724 L ST NW

City WASHINGTON State DC Zip Code 20036-5406

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203914-420000

Amount of Each Disbursement this Period

9	4	.	3
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. OPEN CITY 8843002350

Mailing Address 2331 CALVERT ST NW

City WASHINGTON State DC Zip Code 20008-2622

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203914-430000

Amount of Each Disbursement this Period

3	2	.	6	0
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[MEMO ITEM]
Memo Entry

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

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

0	0	.	0	0
---	---	---	---	---

0	0	.	0	0
---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Starbucks #07281 Was

Mailing Address 1734 L STREET

City Washington State DC Zip Code 20036

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203914-440000

Amount of Each Disbursement this Period

12.49

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. WASH METRORAIL 63100

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203914-450000

Amount of Each Disbursement this Period

3.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. KINKEAD'S

Mailing Address 2000 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20006-1829

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203914-460000

Amount of Each Disbursement this Period

113.00

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement
Computer Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203916

Amount of Each Disbursement this Period

27.49

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. AMAZON MKTPLACE PMTS

Mailing Address 1200 12TH AVE S STE 1200

City SEATTLE State WA Zip Code 98144

Purpose of Disbursement
Computer Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203916-10000

Amount of Each Disbursement this Period

27.49

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement
Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203917

Amount of Each Disbursement this Period

113.15

See Attached Memo Entry

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

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

140.64

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VERIZON ONETIMEPAY

Mailing Address 600 HIDDEN RDG

City VERIZON.COM State TX Zip Code 75038-3809

Purpose of Disbursement Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203917-10000

Amount of Each Disbursement this Period

113.15

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203918

Amount of Each Disbursement this Period

225.25

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. WAL-MART SUPERCENTER

Mailing Address 702 SW 8TH ST

City HARRISBURG State PA Zip Code 72716-6299

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203918-10000

Amount of Each Disbursement this Period

88.74

[MEMO ITEM]
Memo Entry

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

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

225.25

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. QDOBA #0673 0027

Mailing Address 1850 M ST NW

City WASHINGTON State DC Zip Code 20036-5803

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203918-20000

Amount of Each Disbursement this Period

40.14

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CORNER BAKERY

Mailing Address 1828 L ST NW

City WASHINGTON State DC Zip Code 20036-5123

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203918-30000

Amount of Each Disbursement this Period

96.37

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. BOX 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Catering/Facilities

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203926

Amount of Each Disbursement this Period

2622.47

See Attached Memo Entry

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

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

2622.47

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. COSI -ONLINE ORDER 5

Mailing Address 152 WEST 57 ST 46TH FLOO

City NEW YORK State NY Zip Code 10009

Purpose of Disbursement
Catering/Facilities

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203926-10000

Amount of Each Disbursement this Period

120.83

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. MADHATTER 8843001941

Mailing Address 1321 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20036-1801

Purpose of Disbursement
Catering/Facilities

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203926-20000

Amount of Each Disbursement this Period

2212.83

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CHOPT

Mailing Address 1105 19TH ST NW

City WASHINGTON State DC Zip Code 20036-3601

Purpose of Disbursement
Catering/Facilities

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203926-30000

Amount of Each Disbursement this Period

288.81

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. BOX 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Catering/Facilities

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203927

Amount of Each Disbursement this Period

1	4	5	2	.	0	1
---	---	---	---	---	---	---

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. FIREFLY RESTAURANT 0

Mailing Address 1310 NEW HAMPSHIRE AVE NW

City WASHINGTON State DC Zip Code 20036-1502

Purpose of Disbursement
Catering/Facilities

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203927-10000

Amount of Each Disbursement this Period

1	4	5	2	.	0	1
---	---	---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. BOX 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203928

Amount of Each Disbursement this Period

7	0	.	9	2
---	---	---	---	---

See Attached Memo Entry

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

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

1	5	2	2	.	9	3
---	---	---	---	---	---	---

1	4	5	2	.	0	1
---	---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. FRANKLINCOVEYPRODUCT		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 2200 W PARKWAY BLVD		Transaction ID : SB21B-203928-10000
City Salt Lake City	State UT	
Purpose of Disbursement Office Supplies Expenses		Amount of Each Disbursement this Period 70.92
Candidate Name		[MEMO ITEM] Memo Entry
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address P.O. BOX 360001		Transaction ID : SB21B-203929
City Fort Lauderdale	State FL	
Purpose of Disbursement Travel/Accommodation /Meals		Amount of Each Disbursement this Period 151.34
Candidate Name		See Attached Memo Entry
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. TEDS' BULLETIN		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 505 8TH ST SE		Transaction ID : SB21B-203929-10000
City WASHINGTON	State DC	
Purpose of Disbursement Travel/Accommodation /Meals		Amount of Each Disbursement this Period 39.07
Candidate Name		[MEMO ITEM] Memo Entry
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	151.34
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GRILL CONCEPTS - W 5

Mailing Address 1200 18TH ST NW

City WASHINGTON DC State DC Zip Code 20036-2535

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203929-20000

Amount of Each Disbursement this Period

72.28

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. GRILL CONCEPTS - W 5

Mailing Address 1200 18TH ST NW

City WASHINGTON DC State DC Zip Code 20036-2535

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203929-30000

Amount of Each Disbursement this Period

39.99

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203930

Amount of Each Disbursement this Period

2699.10

See Attached Memo Entry

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

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

2699.10

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ADWEEK SUBSCRIPTIONS

Mailing Address 770 BROADWAY

City NEW YORK State NY Zip Code 10003-9522

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203930-10000

Amount of Each Disbursement this Period

99.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BOINGO WIRELESS

Mailing Address 10960 WILSHIRE BLVD

City Los Angeles State CA Zip Code 90024-3711

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203930-20000

Amount of Each Disbursement this Period

9.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. COMCAST CABLE COMM

Mailing Address ATTN LORRAINE LUCERO

City Denver State CO Zip Code 80223-3624

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203930-30000

Amount of Each Disbursement this Period

166.19

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. COVERITLIVE DEMANDM

Mailing Address 1299 OCEAN AVENUE, SUITE

City Santa Monica State CA Zip Code 90401

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203930-40000

Amount of Each Disbursement this Period

299.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CRAIN COMMUNICATIONS

Mailing Address 1155 GRATIOT AVE

City Detroit State MI Zip Code 48207-2732

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203930-50000

Amount of Each Disbursement this Period

99.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DIPITY.COM 000720005

Mailing Address 1010 PENNSYLVANIA AVE

City SAN FRANCISCO State CA Zip Code 94107-3413

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB21B-203930-60000

Amount of Each Disbursement this Period

99.95

[MEMO ITEM]
Memo Entry

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

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

0.00

--

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. FONTS.COM

Mailing Address 500 UNICORN PARK DR

City WOBURN State MA Zip Code 01801-3345

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203930-70000

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. GETTY IMAGES

Mailing Address 605 5TH AVE S

City SEATTLE State WA Zip Code 98104-3887

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203930-80000

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GETTY IMAGES

Mailing Address 605 5TH AVE S

City SEATTLE State WA Zip Code 98104-3887

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203930-90000

Amount of Each Disbursement this Period

155.00

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GJP FAST COMPANY

Mailing Address 7 WORLD TRADE CTR

City NEW YORK State NY Zip Code 10007-2195

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203930-10000

Amount of Each Disbursement this Period

12.99

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HMD* WIRED

Mailing Address 1313 N MARKET ST

City Wilmington State DE Zip Code 19801-1151

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203930-110000

Amount of Each Disbursement this Period

20.79

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOOTSUITE MEDIA INC.

Mailing Address 580 HOWARD ST, STE 101

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203930-120000

Amount of Each Disbursement this Period

5.99

[MEMO ITEM]
Memo Entry

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. NETWORK SOLUTIONS, L

Mailing Address 13861 SUNRISE VALLEY DR

City Herndon State VA Zip Code 20171-6126

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203930-130000

Amount of Each Disbursement this Period

303.92

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Verizon Wrls W2829-0

Mailing Address 2073 S COLORADO BLVD

City DENVER State CO Zip Code 80222-7904

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203930-140000

Amount of Each Disbursement this Period

441.16

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Verizon Wrls W2829-0

Mailing Address 2073 S COLORADO BLVD

City DENVER State CO Zip Code 80222-7904

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203930-150000

Amount of Each Disbursement this Period

602.66

[MEMO ITEM]
Memo Entry

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VZWRLSS BILL PAY VW

Mailing Address 180 WASHINGTON VALLEY RD

City Bedminster State NJ Zip Code 07921-2120

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203930-160000

Amount of Each Disbursement this Period

232.55

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Online Advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203931

Amount of Each Disbursement this Period

132.05

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. FACEBOOK.COM*YSRK422

Mailing Address 1601 WILLOW RD

City Menlo Park State CA Zip Code 94025-1453

Purpose of Disbursement
Online Advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203931-10000

Amount of Each Disbursement this Period

11.02

[MEMO ITEM]
Memo Entry

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

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

132.05

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. FACEBOOK.COM*ZS7K422

Mailing Address 1601 WILLOW RD

City Menlo Park State CA Zip Code 94025-1453

Purpose of Disbursement
Online Advertising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203931-20000

Amount of Each Disbursement this Period

7.58

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Google, Inc.

Mailing Address 1600 AMPHITHEATRE PKWY

City Mountain View State CA Zip Code 94043-1351

Purpose of Disbursement
Online Advertising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203931-30000

Amount of Each Disbursement this Period

113.45

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932

Amount of Each Disbursement this Period

2555.87

See Attached Memo Entry

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

2555.87

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)

<input checked="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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. 1724 L ST AUBONPAIN

Mailing Address 1724 L ST NW

City WASHINGTON State DC Zip Code 20036-5406

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-10000

Amount of Each Disbursement this Period

9.22

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 1724 L ST AUBONPAIN

Mailing Address 1724 L ST NW

City WASHINGTON State DC Zip Code 20036-5406

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-20000

Amount of Each Disbursement this Period

2.30

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. 1724 L ST AUBONPAIN

Mailing Address 1724 L ST NW

City WASHINGTON State DC Zip Code 20036-5406

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-30000

Amount of Each Disbursement this Period

8.57

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. 1724 L ST AUBONPAIN

Mailing Address 1724 L ST NW

City WASHINGTON State DC Zip Code 20036-5406

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203932-40000

Amount of Each Disbursement this Period

4	.	4	9
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 1724 L ST AUBONPAIN

Mailing Address 1724 L ST NW

City WASHINGTON State DC Zip Code 20036-5406

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203932-50000

Amount of Each Disbursement this Period

7	.	0	1
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. 1724 L ST AUBONPAIN

Mailing Address 1724 L ST NW

City WASHINGTON State DC Zip Code 20036-5406

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		1	7		2	0	1	3

Transaction ID : SB21B-203932-60000

Amount of Each Disbursement this Period

9	.	0	0
---	---	---	---

[MEMO ITEM]
Memo Entry

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

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

0	.	0	0
---	---	---	---

0	.	0	0
---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. AIRPORT CNCSNS C3

Mailing Address 9100 PENA BLVD

City DENVER State CO Zip Code 80249

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-70000

Amount of Each Disbursement this Period

10.78

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AIRTRAN

Mailing Address 1800 PHOENIX BLVD

City ATLANTA State GA Zip Code 30349-5547

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-80000

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CARIBOU COFFEE#832 0

Mailing Address 1800 M ST NW

City WASHINGTON State DC Zip Code 20036-5828

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-90000

Amount of Each Disbursement this Period

2.63

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CIRCA AT DUPONT 0079

Mailing Address 1601 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20009-1078

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203932-10000

Amount of Each Disbursement this Period

83.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CIRCA AT DUPONT 0079

Mailing Address 1601 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20009-1078

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203932-110000

Amount of Each Disbursement this Period

48.18

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CIRCA AT DUPONT 0079

Mailing Address 1601 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20009-1078

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203932-120000

Amount of Each Disbursement this Period

27.90

[MEMO ITEM]
Memo Entry

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

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

0.00

**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

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DIA PARKING OPERATIO

Mailing Address 8500 PENA BLVD

City DENVER State CO Zip Code 80249-6340

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-130000

Amount of Each Disbursement this Period

42.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DIA PARKING OPERATIO

Mailing Address 8500 PENA BLVD

City DENVER State CO Zip Code 80249-6340

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-140000

Amount of Each Disbursement this Period

178.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DPW 1515 WYNKOOP DPW

Mailing Address 1515 WYNKOOP

City DENVER State CO Zip Code 80202

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-150000

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]
Memo Entry

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ENTERPRISE RENT A CA

Mailing Address JACKSONVILLE AP (IN TERM)

City JACKSONVILLE State FL Zip Code 32218

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203932-160000

Amount of Each Disbursement this Period

92.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. FRONTIER AIRLINES IN

Mailing Address 7001 TOWER RD

City INDIANAPOLIS State IN Zip Code 80249-7312

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203932-170000

Amount of Each Disbursement this Period

7.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. FRONTIER AIRLINES, I

Mailing Address 7001 TOWER RD

City TULSA State OK Zip Code 80249-7312

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203932-180000

Amount of Each Disbursement this Period

40.00

[MEMO ITEM]
Memo Entry

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. GEORGETOWN CUPCAKE

Mailing Address 1209 POTOMAC ST NW

City WASHINGTON State DC Zip Code 20007-3212

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203932-190000

Amount of Each Disbursement this Period

41.90

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. GOGOAIR.COM

Mailing Address 303 S TECHNOLOGY CT

City Broomfield State IL Zip Code 80021-3411

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203932-200000

Amount of Each Disbursement this Period

5.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. GRILL CONCEPTS - W 5

Mailing Address 1200 18TH ST NW

City WASHINGTON DC State DC Zip Code 20036-2535

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 17 / 2013

Transaction ID : SB21B-203932-210000

Amount of Each Disbursement this Period

39.50

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HOTEL COMPUTING SERV

Mailing Address 1406 SE 164TH AVE.

City VANCOUVER State WA Zip Code 98683

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-203932-220000

Amount of Each Disbursement this Period

1	6	6	4
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HOTEL MADERA 0565

Mailing Address 1310 NEW HAMPSHIRE AVE NW

City WASHINGTON State DC Zip Code 20036-1502

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-203932-230000

Amount of Each Disbursement this Period

1	6	3	9
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOTELS.COM US1111944

Mailing Address 333 108TH AVE NE

City Bellevue State NV Zip Code 98004-5736

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B-203932-240000

Amount of Each Disbursement this Period

7	9	5	0	0
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[MEMO ITEM]
Memo Entry

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

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

0	0	0	0
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0	0	0	0
---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. HOTELS.COM US1112820

Mailing Address 333 108TH AVE NE

City Bellevue State NV Zip Code 98004-5736

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203932-250000

Amount of Each Disbursement this Period

640.74

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HUDSON NEWS 310 WS

Mailing Address NATIONAL AIRPORT

City WASHINGTON State DC Zip Code 20151

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203932-260000

Amount of Each Disbursement this Period

5.54

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PARADIES # 056 Q

Mailing Address JACKSONVILLE FLA INTL ARP

City JACKSONVILLE State FL Zip Code 32229

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203932-270000

Amount of Each Disbursement this Period

3.49

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES (

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-280000

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SOUTHWESTAIR WIFI

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235-1908

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-290000

Amount of Each Disbursement this Period

5.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SOUTHWESTAIR WIFI

Mailing Address 2702 LOVE FIELD DR

City DALLAS State TX Zip Code 75235-1908

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-300000

Amount of Each Disbursement this Period

5.00

[MEMO ITEM]
Memo Entry

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SOUTHWESTAIR*INFLIGH

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-310000

Amount of Each Disbursement this Period

5.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Starbucks #07281 Was

Mailing Address 1734 L STREET

City Washington State DC Zip Code 20036

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-320000

Amount of Each Disbursement this Period

2.48

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Starbucks #07281 Was

Mailing Address 1734 L STREET

City Washington State DC Zip Code 20036

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-330000

Amount of Each Disbursement this Period

2.15

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Starbucks #07281 Was

Mailing Address 1734 L STREET

City Washington State DC Zip Code 20036

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-340000

Amount of Each Disbursement this Period

3.58

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Starbucks #07281 Was

Mailing Address 1734 L STREET

City Washington State DC Zip Code 20036

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-350000

Amount of Each Disbursement this Period

6.05

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Starbucks #07281 Was

Mailing Address 1734 L STREET

City Washington State DC Zip Code 20036

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-360000

Amount of Each Disbursement this Period

3.58

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Starbucks #07281 Was

Mailing Address 1734 L STREET

City Washington State DC Zip Code 20036

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203932-370000

Amount of Each Disbursement this Period

2	.	1	5
---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. THAI CHEF AND SUSHI

Mailing Address 1712 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20009-1103

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203932-380000

Amount of Each Disbursement this Period

8	4	.	1	3
---	---	---	---	---

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. THE DUPONT HOTEL

Mailing Address 1500 NEW HAMPSHIRE AVE NW

City WASHINGTON State DC Zip Code 20036-1204

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-203932-390000

Amount of Each Disbursement this Period

3	9	.	0	0
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[MEMO ITEM]
Memo Entry

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

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

0	.	0	0
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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. TOPAZ-HOTEL 0072

Mailing Address 1733 N ST NW

City WASHINGTON State DC Zip Code 20036-2801

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-400000

Amount of Each Disbursement this Period

5.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. TOPAZ-HOTEL 0072

Mailing Address 1733 N ST NW

City WASHINGTON State DC Zip Code 20036-2801

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-410000

Amount of Each Disbursement this Period

131.37

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City JACKSONVILLE State FL Zip Code 85034-0664

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-420000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ZORBA`S CAFE Q

Mailing Address 1612 20TH ST NW

City WASHINGTON State DC Zip Code 20009-1290

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203932-430000

Amount of Each Disbursement this Period

13.15

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203933

Amount of Each Disbursement this Period

16.16

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. PHONE SVC

Mailing Address 11201 SE 8TH ST

City Bellevue State WA Zip Code 98004-6420

Purpose of Disbursement
Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203933-10000

Amount of Each Disbursement this Period

16.16

[MEMO ITEM]
Memo Entry

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

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

16.16

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203934

Amount of Each Disbursement this Period

173.33

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. UNION CAB OF MADISON

Mailing Address 2458 PENNSYLVANIA AVE

City MADISON State WI Zip Code 53704-4754

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203934-10000

Amount of Each Disbursement this Period

20.70

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. MSN QUIZNOS 2001322

Mailing Address 4000 INTERNATIONAL LANE

City MADISON State WI Zip Code 53704

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203934-30000

Amount of Each Disbursement this Period

11.91

[MEMO ITEM]
Memo Entry

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

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

173.33

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. FRONTIER AIRLINES, I

Mailing Address 7001 TOWER RD

City TULSA State OK Zip Code 80249-7312

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203934-40000

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. FRONTIER AIRLINES, I

Mailing Address 7001 TOWER RD

City TULSA State OK Zip Code 80249-7312

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203934-50000

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. MORTON'S OF CONNECTI

Mailing Address 1050 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20036-5303

Purpose of Disbursement
Travel/Accommodation /Meals

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
01 / 17 / 2013

Transaction ID : SB21B-203934-60000

Amount of Each Disbursement this Period

34.69

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SUBWAY 474460

Mailing Address 1726 M ST NW R100

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		17		2013

Transaction ID : SB21B-203934-70000

Amount of Each Disbursement this Period

2.75

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. MERIDIAN PINT 884300

Mailing Address 3400 11TH ST NW

City WASHINGTON State DC Zip Code 20010-2006

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		17		2013

Transaction ID : SB21B-203934-80000

Amount of Each Disbursement this Period

26.46

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. 1724 L ST AUBONPAIN

Mailing Address 1724 L ST NW

City WASHINGTON State DC Zip Code 20036-5406

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		17		2013

Transaction ID : SB21B-203934-90000

Amount of Each Disbursement this Period

10.10

[MEMO ITEM]
Memo Entry

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

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

0.00

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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. BEAN AND BITE

Mailing Address 1152 15TH ST NW #120

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203934-10000

Amount of Each Disbursement this Period

2.15

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. TORTILLA COAST 0000

Mailing Address 1460 P STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203934-110000

Amount of Each Disbursement this Period

24.57

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 360001

City Ft Lauderdale State FL Zip Code 33336-0001

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203935

Amount of Each Disbursement this Period

3714.70

See Attached Memo Entry

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

3714.70

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. DELTA AIR LINES

Mailing Address DEPT 680 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203935-10000

Amount of Each Disbursement this Period

10.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HOTEL HELIX 0565

Mailing Address 1430 RHODE ISLAND AVE NW

City WASHINGTON State DC Zip Code 20005-5401

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203935-20000

Amount of Each Disbursement this Period

3091.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DELTA AIR LINES

Mailing Address DEPT 680 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-203935-30000

Amount of Each Disbursement this Period

613.20

[MEMO ITEM]
Memo Entry

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

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

0.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2013

Transaction ID : SB21B-204192

Amount of Each Disbursement this Period

0.20

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 401 N Washington St
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement
Payroll Service

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 18 / 2013

Transaction ID : SB21B-204194

Amount of Each Disbursement this Period

214.23

Full Name (Last, First, Middle Initial)

C. Blackbaud Merchant Services

Mailing Address 2000 Daniel Island Drive

City Charleston State SC Zip Code 29492

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2013

Transaction ID : SB21B-204191

Amount of Each Disbursement this Period

209.71

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

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

424.14

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Adelstein Liston

Mailing Address 222 West Ontario Street
Suite 503

City Chicago State IL Zip Code 60610

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2013

Transaction ID : SB21B-203989

Amount of Each Disbursement this Period

1342.26

Full Name (Last, First, Middle Initial)

B. Action Without Borders, Inc.

Mailing Address 302 5th Avenue
Floor 11

City New York State NY Zip Code 10001

Purpose of Disbursement
Employee Recruitment

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2013

Transaction ID : SB21B-203990

Amount of Each Disbursement this Period

70.00

Full Name (Last, First, Middle Initial)

C. Jack I. Bender & Sons

Mailing Address 1120 Connecticut Ave, NW
Suite 1200

City Washington State DC Zip Code 20036

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2013

Transaction ID : SB21B-203993

Amount of Each Disbursement this Period

10466.00

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

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

11878.26

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jack I. Bender & Sons

Mailing Address 1120 Connecticut Ave, NW
Suite 1200

City Washington State DC Zip Code 20036

Purpose of Disbursement
Rent

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 24 / 2013

Transaction ID : SB21B-203994

Amount of Each Disbursement this Period

83103.46

Full Name (Last, First, Middle Initial)

B. Blackbaud

Mailing Address PO Box 930256

City Atlanta State GA Zip Code 31193

Purpose of Disbursement
Data Management

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 24 / 2013

Transaction ID : SB21B-203995

Amount of Each Disbursement this Period

1725.15

Full Name (Last, First, Middle Initial)

C. Emily Campbell

Mailing Address 554 Halloran Springs Road

City Las Vegas State NV Zip Code 89148

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 24 / 2013

Transaction ID : SB21B-203996

Amount of Each Disbursement this Period

128.00

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

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

84956.61

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

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jackson River

Mailing Address 2535 13th St NW
#005

City Washington State DC Zip Code 20009

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	24	/	2013

Transaction ID : SB21B-203999

Amount of Each Disbursement this Period

7250.00

Full Name (Last, First, Middle Initial)

B. Jessica McIntosh

Mailing Address 1700 Kalorama Road
#404

City Washington State DC Zip Code 20009

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	24	/	2013

Transaction ID : SB21B-204000

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

C. Miller's Office Products, Inc.

Mailing Address PO Box 1537

City Newington State VA Zip Code 22122

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	24	/	2013

Transaction ID : SB21B-204001

Amount of Each Disbursement this Period

125.26

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

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

7410.26

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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Meridian Relocation Services

Mailing Address 419 Hampton Court

City Falls Church State VA Zip Code 22046

Purpose of Disbursement
Consulting Administration

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2013

Transaction ID : SB21B-204003

Amount of Each Disbursement this Period

9500.00

Full Name (Last, First, Middle Initial)

B. Prudential

Mailing Address PO Box 945999

City Atlanta State GA Zip Code 30394-5999

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2013

Transaction ID : SB21B-204006

Amount of Each Disbursement this Period

2142.93

Full Name (Last, First, Middle Initial)

C. Purchase Power

Mailing Address PO Box 371874

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2013

Transaction ID : SB21B-204007

Amount of Each Disbursement this Period

800.00

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

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

12442.93

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Katelyn Stoner

Mailing Address 929 7th Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2013

Transaction ID : SB21B-204010

Amount of Each Disbursement this Period

51.00

Full Name (Last, First, Middle Initial)

B. Mary Jane Volk

Mailing Address 541 E. Nelson Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2013

Transaction ID : SB21B-204011

Amount of Each Disbursement this Period

53.00

Full Name (Last, First, Middle Initial)

C. Amy Dacey

Mailing Address 4200 Cathedral Ave., NW
#718

City Washington State DC Zip Code 20016

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2013

Transaction ID : SB21B-204012

Amount of Each Disbursement this Period

22.79

See Attached Memo Entry

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

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

126.79

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Chocolate Moose

Mailing Address 1743 L Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Office Supplies Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2013

Transaction ID : SB21B-204012-10000

Amount of Each Disbursement this Period

22.79

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Amy Dacey

Mailing Address 4200 Cathedral Ave., NW
#718

City Washington State DC Zip Code 20016

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2013

Transaction ID : SB21B-204013

Amount of Each Disbursement this Period

96.00

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address 14 Arrow Street

City Cambridge State MA Zip Code 02138

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2013

Transaction ID : SB21B-204188

Amount of Each Disbursement this Period

1.75

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

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

97.75

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 401 N Washington St
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement
Payroll Service

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 25 / 2013

Transaction ID : SB21B-204195

Amount of Each Disbursement this Period

567.55

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 401 N Washington St
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement
Payroll Service

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2013

Transaction ID : SB21B-204196

Amount of Each Disbursement this Period

168.00

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 401 N Washington St
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement
Taxes - Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204159

Amount of Each Disbursement this Period

48839.33

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

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

49574.88

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 401 N Washington St
Suite 200

City Rockville State MD Zip Code 20850

Purpose of Disbursement
Taxes - Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-204160

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

B. Kimberly Coleman

Mailing Address 1428 Perry Place NW

City Washington State DC Zip Code 20010

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-204110

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C. Caroline Fines

Mailing Address 10621 Regent Park Court

City Fairfax State VA Zip Code 22030

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-204111

Amount of Each Disbursement this Period

Category/
Type

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

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Victoria Kempter

Mailing Address 2950 Van Ness St NW #125

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204112

Amount of Each Disbursement this Period

1204.75

Full Name (Last, First, Middle Initial)

B. Amy Dacey

Mailing Address 4200 Cathedral Ave., NW #718

City Washington State DC Zip Code 20016

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204113

Amount of Each Disbursement this Period

4764.08

Full Name (Last, First, Middle Initial)

C. Megan Giles

Mailing Address 1055 5th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204114

Amount of Each Disbursement this Period

1706.62

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

7675.45

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Lindsay Hicks

Mailing Address 955 South Columbus Street
#120

City Arlington State VA Zip Code 22204

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-204115

Amount of Each Disbursement this Period

1	0	7	5	.	6	3
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Ellen R Malcolm

Mailing Address 5060 Linnean Avenue, NW

City Washington, State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-204116

Amount of Each Disbursement this Period

9	9	1	.	5	2
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Stephanie Schriock

Mailing Address 3225 Valley Drive

City Alexandria State VA Zip Code 22302

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-204117

Amount of Each Disbursement this Period

5	9	9	.	8	5
---	---	---	---	---	---

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

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

8	0	6	.	6	1	0
---	---	---	---	---	---	---

8	0	6	.	6	1	0
---	---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Sooraj Mathew

Mailing Address 800 John Carlyle Street
#322

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204118

Amount of Each Disbursement this Period

2028.31

Full Name (Last, First, Middle Initial)

B. Melanie Smith

Mailing Address 2100 Connecticut Ave, NW
Apartment 609

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204119

Amount of Each Disbursement this Period

955.18

Full Name (Last, First, Middle Initial)

C. Nicole Vance

Mailing Address 1302 Massachusetts Avenue, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204120

Amount of Each Disbursement this Period

1970.79

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

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

4954.28

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Hilary Wallington

Mailing Address 722 12th Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204121

Amount of Each Disbursement this Period

961.69

Full Name (Last, First, Middle Initial)

B. Emily Beardsley

Mailing Address 1776 Lanier Place NW #5C

City Washington State DC Zip Code 20009

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204122

Amount of Each Disbursement this Period

1368.73

Full Name (Last, First, Middle Initial)

C. Erica Best

Mailing Address 221 Seaton Place, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204123

Amount of Each Disbursement this Period

972.46

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

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

3302.88

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Lizzie Cooper

Mailing Address 945 Route 35

City Cross River State NY Zip Code 10518

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204124

Amount of Each Disbursement this Period

2897.82

Full Name (Last, First, Middle Initial)

B. Louisa Whitney

Mailing Address 1701 16th Street NW
Apartment 721

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204125

Amount of Each Disbursement this Period

2828.76

Full Name (Last, First, Middle Initial)

C. Lisa Kurdziel

Mailing Address 1301 U St NW
Apt 627

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204126

Amount of Each Disbursement this Period

2454.83

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

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

8181.41

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Kali Murphy

Mailing Address 461 N Thomas Street
Apt 407

City Arlington State VA Zip Code 22203

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204127

Amount of Each Disbursement this Period

962.69

Category/
Type

Full Name (Last, First, Middle Initial)

B. Michelle Ortiz

Mailing Address 2801 Turk Blvd #306

City San Francisco State CA Zip Code 94118

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204128

Amount of Each Disbursement this Period

2711.60

Category/
Type

Full Name (Last, First, Middle Initial)

C. Andrea Pagano Reyes

Mailing Address 4501 Connecticut Ave, NW #723

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204129

Amount of Each Disbursement this Period

2342.01

Category/
Type

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

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

6016.30

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Pat Reyes

Mailing Address 2601 Glenview Rd

City State Zip Code
Glenview IL 60025

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-204130

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Amalia Stott

Mailing Address 10137 Crestberry Place

City State Zip Code
Bethesda MD 20817

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-204131

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Marissa Strickfaden

Mailing Address 1100 First Street, SE
Apt 511

City State Zip Code
Washington DC 20003

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-204132

Amount of Each Disbursement this Period

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

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jennifer Addison

Mailing Address 1611 Maddux Lane

City McLean State VA Zip Code 22101

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2013

Transaction ID : SB21B-204133

Amount of Each Disbursement this Period

976.39

Full Name (Last, First, Middle Initial)

B. Emily Lockwood

Mailing Address 1275 S. Corona Street

City Denver State CO Zip Code 80210

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2013

Transaction ID : SB21B-204134

Amount of Each Disbursement this Period

2711.30

Full Name (Last, First, Middle Initial)

C. Alison McQuade

Mailing Address 320 23rd Street South
#1526

City Arlington State VA Zip Code 22202

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2013

Transaction ID : SB21B-204135

Amount of Each Disbursement this Period

1765.05

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

5452.74

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Ryan Sims

Mailing Address 730 Newton Place, NW, #2

City Washington State DC Zip Code 20010

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204136

Amount of Each Disbursement this Period

1475.24

Full Name (Last, First, Middle Initial)

B. Sean Wagman

Mailing Address 4107 Connecticut Avenue, NW
#408

City Washington State DC Zip Code 20008

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204137

Amount of Each Disbursement this Period

1411.85

Full Name (Last, First, Middle Initial)

C. Catherine Loeffelman

Mailing Address 1811 Wyoming Ave. NW.
Apt 1

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204138

Amount of Each Disbursement this Period

1965.48

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

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

4852.57

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Priyanka Mantha

Mailing Address 3314 Mt. Pleasant St NW
Apt 37

City Washington State DC Zip Code 20010

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204139

Amount of Each Disbursement this Period

1197.21

Full Name (Last, First, Middle Initial)

B. Jessica Mcintosh

Mailing Address 1700 Kalorama Road
#404

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204140

Amount of Each Disbursement this Period

2298.78

Full Name (Last, First, Middle Initial)

C. Sarah Pierz

Mailing Address 309 M Street NW Apt B

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204141

Amount of Each Disbursement this Period

1015.81

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

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

4511.80

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jessica Byrd

Mailing Address 309 M Street, NW
Apt B

City Washington State DC Zip Code 20001

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2013

Transaction ID : SB21B-204142

Amount of Each Disbursement this Period

1133.51

Full Name (Last, First, Middle Initial)

B. Denise Feriozzi

Mailing Address 1678 A Euclid St. NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2013

Transaction ID : SB21B-204143

Amount of Each Disbursement this Period

3155.58

Full Name (Last, First, Middle Initial)

C. Heather Kashner

Mailing Address 13 Salmon Run

City Camden State ME Zip Code 04843

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2013

Transaction ID : SB21B-204144

Amount of Each Disbursement this Period

2740.45

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

7029.54

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Katelyn Stoner

Mailing Address 929 7th Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-204145

Amount of Each Disbursement this Period

9	4	7	.	4	5
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Mary Jane Volk

Mailing Address 541 E. Nelson Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-204146

Amount of Each Disbursement this Period

2	7	4	.	2	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Muthoni Wambu

Mailing Address 928 Stubblefield Lane

City Baltimore State MD Zip Code 21202

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-204147

Amount of Each Disbursement this Period

2	6	3	.	6	8
---	---	---	---	---	---

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

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

6	3	2	.	6	7
---	---	---	---	---	---

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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Emily Campbell

Mailing Address 554 Halloran Springs Road

City Las Vegas State NV Zip Code 89148

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204148

Amount of Each Disbursement this Period

2280.51

Full Name (Last, First, Middle Initial)

B. Peggy Egan

Mailing Address 20518 East Shore, Hwy 35

City Bigfork State MT Zip Code 59911

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204149

Amount of Each Disbursement this Period

2417.86

Full Name (Last, First, Middle Initial)

C. Samuel Nitz

Mailing Address 1200 N Street, NW
#608

City Washington State DC Zip Code 20005

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204150

Amount of Each Disbursement this Period

1887.09

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

6585.46

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jonathan Parker

Mailing Address 1611 Hobart Street NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204151

Amount of Each Disbursement this Period

3912.39

Full Name (Last, First, Middle Initial)

B. Julie Petrick

Mailing Address 834 11th Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204152

Amount of Each Disbursement this Period

2373.45

Full Name (Last, First, Middle Initial)

C. Leigh Warren

Mailing Address 3109 Patrick Henry Drive
#623

City Falls Church State VA Zip Code 20444

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204153

Amount of Each Disbursement this Period

2485.82

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

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

8771.66

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Yvonne Williams

Mailing Address 5412 Bradford Ct. #231

City Alexandria State VA Zip Code 22311

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2013

Transaction ID : SB21B-204154

Amount of Each Disbursement this Period

1711.73

Full Name (Last, First, Middle Initial)

B. SaBrina Brown

Mailing Address 3730 5th St.

City North Beach State MD Zip Code 20714

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2013

Transaction ID : SB21B-204155

Amount of Each Disbursement this Period

3224.94

Full Name (Last, First, Middle Initial)

C. Lesbia Cajchun

Mailing Address 2902 Kings Chapel Rd, #7

City Falls Church State VA Zip Code 22042

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2013

Transaction ID : SB21B-204156

Amount of Each Disbursement this Period

2004.39

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

6941.06

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Ray Keating

Mailing Address 816 Lucky Rd

City State Zip Code
Severn MD 21144

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-204157

Amount of Each Disbursement this Period

2	1	8	7	.	1	3
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Jen Bluestein Lamb

Mailing Address 5617 N. 23rd Street

City State Zip Code
Arlington VA 22205

Purpose of Disbursement
Salaries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-204158

Amount of Each Disbursement this Period

3	9	7	9	.	8	7
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 401 N Washington St
Suite 200

City State Zip Code
Rockville MD 20850

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB21B-204023

Amount of Each Disbursement this Period

1	3	2	9	.	2	9
---	---	---	---	---	---	---

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

6	2	9	9	.	2	9
---	---	---	---	---	---	---

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

6	2	9	9	.	2	9
---	---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Atomic

Mailing Address 615 North 3rd Street

City Minneapolis State MN Zip Code 55401

Purpose of Disbursement
Computer Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204024

Amount of Each Disbursement this Period

8750.00

Full Name (Last, First, Middle Initial)

B. Blackmesh

Mailing Address 2465 J-17 Centreville Road

City Herndon State VA Zip Code 20171

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204026

Amount of Each Disbursement this Period

1775.00

Full Name (Last, First, Middle Initial)

C. Morgan Cahn

Mailing Address 26688 Martinique Drive

City Orange Beach State AL Zip Code 36561

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204027

Amount of Each Disbursement this Period

800.00

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

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

8325.00

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. CRMfusion Inc.

Mailing Address 52 Chartwell Cres

City Keswick State ON Zip Code L4P 3N8

Purpose of Disbursement Data Management

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2013

Transaction ID : SB21B-204040

Amount of Each Disbursement this Period: 950.00

Category/Type

Full Name (Last, First, Middle Initial)

B. Dell Business Credit

Mailing Address PO Box 5275

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement Computer Supplies/Hardware

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2013

Transaction ID : SB21B-204041

Amount of Each Disbursement this Period: 812.60

Category/Type

Full Name (Last, First, Middle Initial)

C. Federal Express

Mailing Address P. O. Box 371461

City Pittsburg State PA Zip Code 15250-7461

Purpose of Disbursement Deliveries

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 31 / 2013

Transaction ID : SB21B-204042

Amount of Each Disbursement this Period: 16.04

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1778.64

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jackson River

Mailing Address 2535 13th St NW
#005

City Washington State DC Zip Code 20009

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204045

Amount of Each Disbursement this Period

19762.50

Full Name (Last, First, Middle Initial)

B. Jackson River

Mailing Address 2535 13th St NW
#005

City Washington State DC Zip Code 20009

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204046

Amount of Each Disbursement this Period

7250.00

Full Name (Last, First, Middle Initial)

C. Jackson River

Mailing Address 2535 13th St NW
#005

City Washington State DC Zip Code 20009

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204047

Amount of Each Disbursement this Period

4506.00

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

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

31518.50

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jackson River

Mailing Address 2535 13th St NW
#005

City Washington State DC Zip Code 20009

Purpose of Disbursement
Media -Generic Mail/TV/Radio

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204048

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

B. Jackson River

Mailing Address 2535 13th St NW
#005

City Washington State DC Zip Code 20009

Purpose of Disbursement
Internet Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204049

Amount of Each Disbursement this Period

112.50

Full Name (Last, First, Middle Initial)

C. Superior Building Services Inc JIB Service Group

Mailing Address 1120 Connecticut Ave, NW Ste 1200

City Washington State DC Zip Code 20036

Purpose of Disbursement
Building Utilities & Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204050

Amount of Each Disbursement this Period

331.25

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

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

593.75

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jessica McIntosh

Mailing Address 1700 Kalorama Road
#404

City Washington State DC Zip Code 20009

Purpose of Disbursement
Travel/Accommodation /Meals

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
0	1		3	1		2	0	1	3

Transaction ID : SB21B-204051

Amount of Each Disbursement this Period

4	4	.	0	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. MetLife Small Business Center

Mailing Address PO Box 804466

City Kansas City State MO Zip Code 64180

Purpose of Disbursement
Insurance Health/Life

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
0	1		3	1		2	0	1	3

Transaction ID : SB21B-204052

Amount of Each Disbursement this Period

2	9	0	3	.	1
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Miller's Office Products, Inc.

Mailing Address PO Box 1537

City Newington State VA Zip Code 22122

Purpose of Disbursement
Office Supplies Expenses

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
0	1		3	1		2	0	1	3

Transaction ID : SB21B-204053

Amount of Each Disbursement this Period

3	0	.	9	4
---	---	---	---	---

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

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

2	9	7	8	.	0	5
---	---	---	---	---	---	---

2	9	7	8	.	0	5
---	---	---	---	---	---	---

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Nexus Direct

Mailing Address 2101 Parks Avenue
Ste 600

City Virginia Beach State VA Zip Code 23451

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204055

Amount of Each Disbursement this Period

3125.00

Full Name (Last, First, Middle Initial)

B. Nexus Direct

Mailing Address 2101 Parks Avenue
Ste 600

City Virginia Beach State VA Zip Code 23451

Purpose of Disbursement
Copy Writer

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204056

Amount of Each Disbursement this Period

8815.00

Full Name (Last, First, Middle Initial)

C. Nexus Direct

Mailing Address 2101 Parks Avenue
Ste 600

City Virginia Beach State VA Zip Code 23451

Purpose of Disbursement
Data Management

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204057

Amount of Each Disbursement this Period

3684.40

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

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

15624.40

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Nexus Direct

Mailing Address 2101 Parks Avenue
Ste 600

City Virginia Beach State VA Zip Code 23451

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-204058

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Nexus Direct

Mailing Address 2101 Parks Avenue
Ste 600

City Virginia Beach State VA Zip Code 23451

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-204059

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Nexus Direct

Mailing Address 2101 Parks Avenue
Ste 600

City Virginia Beach State VA Zip Code 23451

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-204060

Amount of Each Disbursement this Period

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

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Nexus Direct

Mailing Address 2101 Parks Avenue
Ste 600

City Virginia Beach State VA Zip Code 23451

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204061

Amount of Each Disbursement this Period

51130.79

Full Name (Last, First, Middle Initial)

B. Production Solutions, Inc.

Mailing Address 1953 Gallows Road
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204064

Amount of Each Disbursement this Period

1450.00

Full Name (Last, First, Middle Initial)

C. Production Solutions, Inc.

Mailing Address 1953 Gallows Road
Suite 600

City Vienna State VA Zip Code 22182

Purpose of Disbursement
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204069

Amount of Each Disbursement this Period

7.07

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

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

52587.86

**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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Production Solutions, Inc.		Date of Disbursement MM / DD / YYYY 01 / 31 / 2013
Mailing Address 1953 Gallows Road Suite 600		Transaction ID : SB21B-204070
City Vienna State VA Zip Code 22182	Amount of Each Disbursement this Period 3568.61	
Purpose of Disbursement Printing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. Production Solutions, Inc.		Date of Disbursement MM / DD / YYYY 01 / 31 / 2013
Mailing Address 1953 Gallows Road Suite 600		Transaction ID : SB21B-204071
City Vienna State VA Zip Code 22182	Amount of Each Disbursement this Period -17.80	
Purpose of Disbursement Postage Credit	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. Production Solutions, Inc.		Date of Disbursement MM / DD / YYYY 01 / 31 / 2013
Mailing Address 1953 Gallows Road Suite 600		Transaction ID : SB21B-204072
City Vienna State VA Zip Code 22182	Amount of Each Disbursement this Period 16111.55	
Purpose of Disbursement Printing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	19662.36
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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Red Top Cab

Mailing Address P.O. Box 100519

City State Zip Code
Arlington VA 22210

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2013

Transaction ID : SB21B-204074

Amount of Each Disbursement this Period

48.65

Full Name (Last, First, Middle Initial)

B. U. S. Postal Service

Mailing Address 1501 Connecticut Ave NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement
Postage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2013

Transaction ID : SB21B-204078

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

C. Leigh Warren

Mailing Address 3109 Patrick Henry Drive
#623

City State Zip Code
Falls Church VA 20444

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2013

Transaction ID : SB21B-204079

Amount of Each Disbursement this Period

92.00

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

7640.65

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Ellen R Malcolm

Mailing Address 5060 Linnean Avenue, NW

City Washington, State DC Zip Code 20008

Purpose of Disbursement
Insurance Health/Life

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204199

Amount of Each Disbursement this Period

624.65

Full Name (Last, First, Middle Initial)

B. Jeanne Duncan

Mailing Address 1633 NE Going Street

City Portland State OR Zip Code 97211

Purpose of Disbursement
Consulting Fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204198

Amount of Each Disbursement this Period

8000.00

Full Name (Last, First, Middle Initial)

C. Woodsboro Bank

Mailing Address 5 N Main St

City Woodsboro State MD Zip Code 21798

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2013

Transaction ID : SB21B-204203

Amount of Each Disbursement this Period

10.00

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

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

8634.65

1138664.56

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Abah Kau

Mailing Address 123 Asd Asd

City Bellview State FL Zip Code 32526

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB28A-204161

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Nancy Schatken

Mailing Address 2677 S. Parkview Drive

City Hallandale State FL Zip Code 33009

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB28A-204086

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Susan Gordon

Mailing Address 310 W 49th Street
Apt 404

City Kansas City State MO Zip Code 64112

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB28A-204087

Amount of Each Disbursement this Period

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

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Jeannette Snyder

Mailing Address 3012 Cove View Lane

City Midlothian State VA Zip Code 23112

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		03		2013

Transaction ID : SB28A-204088

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Gail Findley

Mailing Address 3443 Midnight Moon Street

City Las Vegas State NV Zip Code 89135

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		03		2013

Transaction ID : SB28A-204089

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Ronald Quandt

Mailing Address 17680 Hansom Ct

City South Bend State IN Zip Code 46635

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		06		2013

Transaction ID : SB28A-204097

Amount of Each Disbursement this Period

25.00

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

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

75.00

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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Marie Wilson		Date of Disbursement MM / DD / YYYY 01 / 10 / 2013
Mailing Address 5 East 22nd #29d		Transaction ID : SB28A-204090
City New York	State NY	
Zip Code 10010	Purpose of Disbursement Refund	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. Joel Weinberge		Date of Disbursement MM / DD / YYYY 01 / 10 / 2013
Mailing Address 1131 Sycamore Lane		Transaction ID : SB28A-204091
City Mahwah	State NJ	
Zip Code 07430	Purpose of Disbursement Refund	Amount of Each Disbursement this Period 15.00
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) C. Mary Louis Bishop		Date of Disbursement MM / DD / YYYY 01 / 10 / 2013
Mailing Address 4242 E. West Hwy., Apt. 910		Transaction ID : SB28A-204092
City Chevy Chase	State MD	
Zip Code 20815	Purpose of Disbursement Refund	Amount of Each Disbursement this Period 4088.00
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	5103.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Ann Kieger		Date of Disbursement MM / DD / YYYY 01 / 10 / 2013
Mailing Address 18224 Winslow Rd		Transaction ID : SB28A-204093
City Shaker Heights	State OH	
Purpose of Disbursement Refund	Candidate Name	Amount of Each Disbursement this Period 10.00
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. Barbara Gideon		Date of Disbursement MM / DD / YYYY 01 / 10 / 2013
Mailing Address General Delivery		Transaction ID : SB28A-204094
City West Palm Beach	State FL	
Purpose of Disbursement Refund	Candidate Name	Amount of Each Disbursement this Period 2500.00
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. Gail Findley		Date of Disbursement MM / DD / YYYY 01 / 13 / 2013
Mailing Address 3443 Midnight Moon Street		Transaction ID : SB28A-204085
City Las Vegas	State NV	
Purpose of Disbursement Refund	Candidate Name	Amount of Each Disbursement this Period 25.00
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	2535.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Judith Lilly

Mailing Address 9774 175th RD

City Amherst State NE Zip Code 68812

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	16	/	2013

Transaction ID : SB28A-204162

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

B. Gloria Cotlar

Mailing Address 7366 Pershing Ave. #1

City University City State MO Zip Code 63130

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB28A-204095

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. Eric Chipman

Mailing Address 239 Watertown Street #207

City Newton State MA Zip Code 02458

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	17	/	2013

Transaction ID : SB28A-204096

Amount of Each Disbursement this Period

5.00

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

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

50.00

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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Barbara Brewer		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 3838 Rainbow Blvd Apt 204		Transaction ID : SB28A-204163
City Kansas City	State KS	
Purpose of Disbursement Refund	Candidate Name	Amount of Each Disbursement this Period 20.00
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. Karen Thesing		Date of Disbursement MM / DD / YYYY 01 / 22 / 2013
Mailing Address 1947 Pierce St		Transaction ID : SB28A-204098
City Daniel Island	State SC	
Purpose of Disbursement Refund	Candidate Name	Amount of Each Disbursement this Period 60.00
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. Phillipa Kafka		Date of Disbursement MM / DD / YYYY 01 / 23 / 2013
Mailing Address 376 Claremont Street		Transaction ID : SB28A-204099
City Boulder City	State NV	
Purpose of Disbursement Refund	Candidate Name	Amount of Each Disbursement this Period 15.00
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	95.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Alan Wolfer

Mailing Address 666 Shore Rd. Apt 4B

City Long Beach State NY Zip Code 11561

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		23		2013

Transaction ID : SB28A-204106

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

B. Joyce Kenyon

Mailing Address 918 N. Havenhurst Dr. #109

City West Hollywood State CA Zip Code 90046

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		23		2013

Transaction ID : SB28A-204235

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. Diana Gould

Mailing Address 14709 Bestor Blvd

City Pacific Palisades State CA Zip Code 90272

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		24		2013

Transaction ID : SB28A-204165

Amount of Each Disbursement this Period

100.00

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

125.00

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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Kathleen Peterson		Date of Disbursement MM / DD / YYYY 01 / 25 / 2013
Mailing Address 4174 E. Carob Dr.		Transaction ID : SB28A-204100
City Gilbert	State AZ	
Purpose of Disbursement Refund	Candidate Name	Amount of Each Disbursement this Period 50.00
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. Donald Sauter		Date of Disbursement MM / DD / YYYY 01 / 28 / 2013
Mailing Address 104 SW 23 St		Transaction ID : SB28A-204101
City Blue Springs	State MO	
Purpose of Disbursement Refund	Candidate Name	Amount of Each Disbursement this Period 80.00
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:	Category/Type	

Full Name (Last, First, Middle Initial) C. David Cockroft		Date of Disbursement MM / DD / YYYY 01 / 28 / 2013
Mailing Address 5900 Arlington Ave., Apt. 11U		Transaction ID : SB28A-204102
City Bronx	State NY	
Purpose of Disbursement Refund	Candidate Name	Amount of Each Disbursement this Period 40.00
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....▶	170.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Arin Matzen

Mailing Address 1953 Lake Whatcom Blvd.
#1A

City Bellingham State WA Zip Code 98229

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2013

Transaction ID : SB28A-204103

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Priscilla Gilman

Mailing Address 4537 Deer Run

City Evans State GA Zip Code 30809

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2013

Transaction ID : SB28A-204104

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Laura Wolf

Mailing Address 1053 Southwood Dr.

City Villa Rica State GA Zip Code 30180

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	30	/	2013

Transaction ID : SB28A-204105

Amount of Each Disbursement this Period

35.00

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

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

310.00

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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)

<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)
EMILY's List

Full Name (Last, First, Middle Initial) A. Marie Glover		Date of Disbursement MM / DD / YYYY 01 / 30 / 2013
Mailing Address 312 Clarke St Apt. B		Transaction ID : SB28A-204164
City Helena	State MT	
Purpose of Disbursement Refund		Amount of Each Disbursement this Period 10.00
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) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) B. Rosemary Craig		Date of Disbursement MM / DD / YYYY 01 / 31 / 2013
Mailing Address 4767 Brixston Dr		Transaction ID : SB28A-204107
City Hilliard	State OH	
Purpose of Disbursement Refund		Amount of Each Disbursement this Period 25.00
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) ▼	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement		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) ▼	Category/ Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	35.00
TOTAL This Period (last page this line number only).....▶	8553.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)

A. EMILY's List Non-Federal #3

Mailing Address 1120 Connecticut Ave NW
Suite 1100

City Washington State DC Zip Code 20036

Purpose of Disbursement
Transfer to Non-Federal Fund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29-204170

Amount of Each Disbursement this Period

B Storey Orig Cntrb 12/28/12

Full Name (Last, First, Middle Initial)

B. EMILY's List Non-Federal #3

Mailing Address 1120 Connecticut Ave NW
Suite 1100

City Washington State DC Zip Code 20036

Purpose of Disbursement
Transfer to Non-Federal Fund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29-204169

Amount of Each Disbursement this Period

S Martin Orig Cntrb 12/31/12

Full Name (Last, First, Middle Initial)

C. EMILY's List Non-Federal #3

Mailing Address 1120 Connecticut Ave NW
Suite 1100

City Washington State DC Zip Code 20036

Purpose of Disbursement
Transfer to Non-Federal Fund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29-204175

Amount of Each Disbursement this Period

C Lines Orig Cntrb 12/27/12

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

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)

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)

A. EMILY's List Non-Federal #3

Mailing Address 1120 Connecticut Ave NW
Suite 1100

City Washington State DC Zip Code 20036

Purpose of Disbursement
Transfer to Non-Federal Fund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29-204171

Amount of Each Disbursement this Period

C Samuels Orig Cntrb 12/28/12

Full Name (Last, First, Middle Initial)

B. EMILY's List Non-Federal #3

Mailing Address 1120 Connecticut Ave NW
Suite 1100

City Washington State DC Zip Code 20036

Purpose of Disbursement
Transfer to Non-Federal Fund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29-204174

Amount of Each Disbursement this Period

S McDaniel Orig Cntrb 12/31/12

Full Name (Last, First, Middle Initial)

C. EMILY's List Non-Federal #3

Mailing Address 1120 Connecticut Ave NW
Suite 1100

City Washington State DC Zip Code 20036

Purpose of Disbursement
Transfer to Non-Federal Fund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29-204168

Amount of Each Disbursement this Period

R Frye Orig Cntrb 12/19/12

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

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)

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)

A. EMILY's List Non-Federal #3

Mailing Address 1120 Connecticut Ave NW
Suite 1100

City Washington State DC Zip Code 20036

Purpose of Disbursement
Transfer to Non-Federal Fund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29-204172

Amount of Each Disbursement this Period

B Stampfl Orig Cntrb 12/19/12 & 12/28/12

Full Name (Last, First, Middle Initial)

B. EMILY's List Non-Federal #3

Mailing Address 1120 Connecticut Ave NW
Suite 1100

City Washington State DC Zip Code 20036

Purpose of Disbursement
Transfer to Non-Federal Fund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29-204176

Amount of Each Disbursement this Period

J Honig Orig Cntrb 12/29/12

Full Name (Last, First, Middle Initial)

C. EMILY's List Non-Federal #3

Mailing Address 1120 Connecticut Ave NW
Suite 1100

City Washington State DC Zip Code 20036

Purpose of Disbursement
Transfer to Non-Federal Fund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29-204173

Amount of Each Disbursement this Period

C Carr Orig Cntrb 12/20/12

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

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)

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial) A. EMILY's List Non-Federal #3		Date of Disbursement MM / DD / YYYY 01 / 15 / 2013
Mailing Address 1120 Connecticut Ave NW Suite 1100		Transaction ID : SB29-204179
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Transfer to Non-Federal Fund	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/Type	A Hess Orig Cntrb 12/20/12
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:		

Full Name (Last, First, Middle Initial) B. EMILY's List Non-Federal #3		Date of Disbursement MM / DD / YYYY 01 / 15 / 2013
Mailing Address 1120 Connecticut Ave NW Suite 1100		Transaction ID : SB29-204178
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Transfer to Non-Federal Fund	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/Type	S Rubin Orig Cntrb 12/28/12
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:		

Full Name (Last, First, Middle Initial) C. EMILY's List Non-Federal #1		Date of Disbursement MM / DD / YYYY 01 / 17 / 2013
Mailing Address 1120 Connecticut Ave NW Suite 1100		Transaction ID : SB29-203866
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Transfer to Non-Federal Fund	Amount of Each Disbursement this Period 5000.00
Candidate Name	Category/Type	K Petel Orig Cntrb 12/21/12
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)

A. EMILY's List Non-Federal #3

Mailing Address 1120 Connecticut Ave NW
Suite 1100

City Washington State DC Zip Code 20036

Purpose of Disbursement
Transfer to Non-Federal Fund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
01 / 23 / 2013

Transaction ID : SB29-204180

Amount of Each Disbursement this Period

5000.00

R Dye Orig Cntrb 12/18/12

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

/ /

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

/ /

Amount of Each Disbursement this Period

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

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

5000.00

30960.00

SCHEDULE H2 (FEC Form 3X)

ALLOCATION RATIOS

NAME OF COMMITTEE (In Full)
EMILY's List

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER Fundraising/PSP 2013 ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported Transaction ID : H2-EL-1767	FEDERAL % <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;">50.00</div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;">50.00</div> %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	FEDERAL % <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %	NONFEDERAL % <div style="border: 1px solid black; padding: 2px; width: 100px; text-align: center;"> </div> %

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Cornucopia, Inc. Transaction ID: H4-203692. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form B: Production Solutions, Inc. Transaction ID: H4-203711. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

Form C: Production Solutions, Inc. Transaction ID: H4-203712. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Activity or Event Identifier, Allocated Activity or Event, and Year-To-Date amounts.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 2587.45, NONFEDERAL SHARE 2587.45, TOTAL AMOUNT 5174.90

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-203713 Production Solutions, Inc.		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1953 Gallows Road Suite 600		Allocated Activity or Event Year-To-Date 5057.93	
City State Zip Code Vienna VA 22182	Date <input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>		
Purpose of Disbursement: Postage Credit	<input type="text"/>	Allocated Activity or Event Year-To-Date 5057.93	
Activity or Event Identifier: PSP13		Date <input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="-58.48"/> + <input type="text" value="-58.49"/> = <input type="text" value="-116.97"/>			

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-203714 Production Solutions, Inc.		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1953 Gallows Road Suite 600		Allocated Activity or Event Year-To-Date 5478.43	
City State Zip Code Vienna VA 22182	Date <input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>		
Purpose of Disbursement: Printing	<input type="text"/>	Allocated Activity or Event Year-To-Date 5478.43	
Activity or Event Identifier: PSP13		Date <input type="text" value="01"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="210.25"/> + <input type="text" value="210.25"/> = <input type="text" value="420.50"/>			

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-203730 Production Solutions, Inc.		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1953 Gallows Road Suite 600		Allocated Activity or Event Year-To-Date 7556.03	
City State Zip Code Vienna VA 22182	Date <input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>		
Purpose of Disbursement: Postage	<input type="text"/>	Allocated Activity or Event Year-To-Date 7556.03	
Activity or Event Identifier: PSP13		Date <input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2013"/>	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="1038.80"/> + <input type="text" value="1038.80"/> = <input type="text" value="2077.60"/>			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="1190.57"/>		<input type="text" value="1190.56"/>		<input type="text" value="2381.13"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-203749
Andrea Pagano Reyes
Mailing Address 4501 Connecticut Ave, NW #723
City Washington State DC Zip Code 20008
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 7582.48
Date 01 / 10 / 2013
FEDERAL SHARE 13.22 + NONFEDERAL SHARE 13.23 = TOTAL AMOUNT 26.45

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-203751
Erica Best
Mailing Address 221 Seaton Place, NE
City Washington State DC Zip Code 20002
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 7602.48
Date 01 / 10 / 2013
FEDERAL SHARE 10.00 + NONFEDERAL SHARE 10.00 = TOTAL AMOUNT 20.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-203758
Capital Strategies
Mailing Address 14000 Old Harbor Lane Suite 202
City Marina Del Rey State CA Zip Code 90292
Purpose of Disbursement: Consulting Fundraising
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 15102.48
Date 01 / 10 / 2013
FEDERAL SHARE 3750.00 + NONFEDERAL SHARE 3750.00 = TOTAL AMOUNT 7500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 3773.22, 3773.23, 7546.45

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Emily Clack Photography LLC. Transaction ID: H4-203761. Allocated Activity or Event: Fundraising. Total Amount: 300.00.

Form B: Cornucopia, Inc. Transaction ID: H4-203762. Allocated Activity or Event: Fundraising. Total Amount: 3000.00.

Form C: Lisa Kurdziel. Transaction ID: H4-203770. Allocated Activity or Event: Fundraising. Total Amount: 99.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1699.50, 1699.50, 3399.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [blank], [blank], [blank].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-203774
Kali Murphy
Mailing Address 461 N Thomas Street Apt 407
City Arlington State VA Zip Code 22203
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 18519.48
Date 01 / 10 / 2013
FEDERAL SHARE 9.00 + NONFEDERAL SHARE 9.00 = TOTAL AMOUNT 18.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-203780
Production Solutions, Inc.
Mailing Address 1953 Gallows Road Suite 600
City Vienna State VA Zip Code 22182
Purpose of Disbursement: Printing
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 19639.94
Date 01 / 10 / 2013
FEDERAL SHARE 560.23 + NONFEDERAL SHARE 560.23 = TOTAL AMOUNT 1120.46

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-203784
Rylo Consulting
Mailing Address 908 E. 5th St Suite 201
City Austin State TX Zip Code 78702
Purpose of Disbursement: Consulting Fundraising
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 23639.94
Date 01 / 10 / 2013
FEDERAL SHARE 2000.00 + NONFEDERAL SHARE 2000.00 = TOTAL AMOUNT 4000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 2569.23, 2569.23, 5138.46

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Summit Event Production and I, Transaction ID: H4-203786. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Deliveries), Activity Identifier (PSP13), Allocated Activity (Fundraising checked), Year-To-Date (23839.94), Date (01/10/2013), and a summary table showing Federal Share (100.00) and Nonfederal Share (100.00) totaling 200.00.

Form B: Summit Event Production and I, Transaction ID: H4-203787. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Event Supplies), Activity Identifier (PSP13), Allocated Activity (Fundraising checked), Year-To-Date (26009.34), Date (01/10/2013), and a summary table showing Federal Share (1084.70) and Nonfederal Share (1084.70) totaling 2169.40.

Form C: Summit Event Production and I, Transaction ID: H4-203788. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Temporary Help), Activity Identifier (PSP13), Allocated Activity (Fundraising checked), Year-To-Date (26809.34), Date (01/10/2013), and a summary table showing Federal Share (400.00) and Nonfederal Share (400.00) totaling 800.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 1584.70 + NONFEDERAL SHARE 1584.70 = TOTAL AMOUNT 3169.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Shellie Levin Solutions, Inc		Transaction ID : H4-203789	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 22800 SW 157 Ave			Allocated Activity or Event Year-To-Date 34309.34	
City Miami	State FL	Zip Code 33170	Date 01 / 10 / 2013	
Purpose of Disbursement: Consulting Fundraising		Category/ Type	Date 01 / 10 / 2013	
Activity or Event Identifier: PSP13			Date 01 / 10 / 2013	
FEDERAL SHARE		+	NONFEDERAL SHARE	
3750.00			3750.00	
		=	TOTAL AMOUNT	
			7500.00	

B. Full Name (Last, First, Middle Initial) Shellie Levin Solutions, Inc		Transaction ID : H4-203790	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 22800 SW 157 Ave			Allocated Activity or Event Year-To-Date 34633.34	
City Miami	State FL	Zip Code 33170	Date 01 / 10 / 2013	
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	Date 01 / 10 / 2013	
Activity or Event Identifier: PSP13			Date 01 / 10 / 2013	
FEDERAL SHARE		+	NONFEDERAL SHARE	
162.00			162.00	
		=	TOTAL AMOUNT	
			324.00	

C. Full Name (Last, First, Middle Initial) United Parcel Service		Transaction ID : H4-203792	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 7247-0244			Allocated Activity or Event Year-To-Date 34722.04	
City Philadelphia	State PA	Zip Code 19170-0001	Date 01 / 10 / 2013	
Purpose of Disbursement: Deliveries		Category/ Type	Date 01 / 10 / 2013	
Activity or Event Identifier: PSP13			Date 01 / 10 / 2013	
FEDERAL SHARE		+	NONFEDERAL SHARE	
44.35			44.35	
		=	TOTAL AMOUNT	
			88.70	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3956.35		3956.35		7912.70

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4-203796
United Parcel Service
Mailing Address P. O. Box 7247-0244
City Philadelphia State PA Zip Code 19170-0001
Purpose of Disbursement: Deliveries
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date: 34741.45
Date: 01 / 10 / 2013
FEDERAL SHARE: 9.70 NONFEDERAL SHARE: 9.71 TOTAL AMOUNT: 19.41

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4-203839
Andrea Pagano Reyes
Mailing Address 4501 Connecticut Ave, NW #723
City Washington State DC Zip Code 20008
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date: 34767.45
Date: 01 / 17 / 2013
FEDERAL SHARE: 13.00 NONFEDERAL SHARE: 13.00 TOTAL AMOUNT: 26.00

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4-203847
Clearpath Production
Mailing Address 1000 Fell St Ste 623
City Baltimore State MD Zip Code 21231
Purpose of Disbursement: Deliveries
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date: 35317.45
Date: 01 / 17 / 2013
FEDERAL SHARE: 275.00 NONFEDERAL SHARE: 275.00 TOTAL AMOUNT: 550.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 297.70, 297.71, 595.41

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Clearpath Production, Transaction ID: H4-203848. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Design/Graphics), Activity or Event Identifier (PSP13), Allocated Activity or Event (Fundraising checked), and Year-To-Date amount (39317.45).

Form B: Clearpath Production, Transaction ID: H4-203849. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Event Supplies), Activity or Event Identifier (PSP13), Allocated Activity or Event (Fundraising checked), and Year-To-Date amount (46389.05).

Form C: Clearpath Production, Transaction ID: H4-203850. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Media-Generic Production), Activity or Event Identifier (PSP13), Allocated Activity or Event (Fundraising checked), and Year-To-Date amount (49014.05).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 6848.30, NONFEDERAL SHARE 6848.30, TOTAL AMOUNT 13696.60

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-203851
Clearpath Production
Mailing Address 1000 Fell St Ste 623
City Baltimore State MD Zip Code 21231
Purpose of Disbursement: Temporary Help
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 55514.05
Date 01 / 17 / 2013
FEDERAL SHARE 3250.00 + NONFEDERAL SHARE 3250.00 = TOTAL AMOUNT 6500.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-203854
Lizzie Cooper
Mailing Address 945 Route 35
City Cross River State NY Zip Code 10518
Purpose of Disbursement: Telephone
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 55543.95
Date 01 / 17 / 2013
See Attached Memo Entry
FEDERAL SHARE 14.95 + NONFEDERAL SHARE 14.95 = TOTAL AMOUNT 29.90

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-203854-10000
Optimum
Mailing Address 6 Corporate Center Drive
City Melville State NY Zip Code 11747
Purpose of Disbursement: Telephone
Activity or Event Identifier: [MEMO ITEM] Memo Entry
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date
Date 01 / 17 / 2013
FEDERAL SHARE 14.95 + NONFEDERAL SHARE 14.95 = TOTAL AMOUNT 29.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 3264.95, 3264.95, 6529.90

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Chris Grasso Music, LLC. Transaction ID: H4-203859. Allocated Activity or Event: Fundraising. Date: 01/17/2013. Total Amount: 175.00.

Form B: Kali Murphy. Transaction ID: H4-203865. Allocated Activity or Event: Fundraising. Date: 01/17/2013. Total Amount: 21.00.

Form C: Michelle Ortiz. Transaction ID: H4-203867. Allocated Activity or Event: Fundraising. Date: 01/17/2013. Total Amount: 29.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 112.50, NONFEDERAL SHARE 112.50, TOTAL AMOUNT 225.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Comcast		Transaction ID : H4-203867-10000		Allocated Activity or Event:	
Mailing Address 40 West Leeds Ave				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Pleasantville State NJ Zip Code 08232				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Telephone				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 01 / 17 / 2013	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
14.50		14.50		29.00	

B. Full Name (Last, First, Middle Initial) Plants Alive, Inc.		Transaction ID : H4-203869		Allocated Activity or Event:	
Mailing Address 15710 Layhill Road				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Silver Spring State MD Zip Code 20906				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Event Supplies				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: PSP13		Category/Type		Allocated Activity or Event Year-To-Date	
				Date 01 / 17 / 2013	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
395.45		395.45		790.90	

C. Full Name (Last, First, Middle Initial) Shiloh Baptist Church		Transaction ID : H4-203870		Allocated Activity or Event:	
Mailing Address 1500 9th Street NW				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Washington State DC Zip Code 20001				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Temporary Help				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: PSP13		Category/Type		Allocated Activity or Event Year-To-Date	
				Date 01 / 17 / 2013	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
1000.00		1000.00		2000.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1395.45		1395.45		2790.90

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-203872
Shellie Levin Solutions, Inc
Mailing Address 22800 SW 157 Ave
City Miami State FL Zip Code 33170
Purpose of Disbursement: Consulting Fundraising
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 117859.85
Date 01 / 17 / 2013
FEDERAL SHARE 29650.00 + NONFEDERAL SHARE 29650.00 = TOTAL AMOUNT 59300.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-203876
Nicole Vance
Mailing Address 1302 Massachusetts Avenue, SE
City Washington State DC Zip Code 20003
Purpose of Disbursement: Event Supplies
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 117880.17
Date 01 / 17 / 2013
See Attached Memo Entry
FEDERAL SHARE 10.16 + NONFEDERAL SHARE 10.16 = TOTAL AMOUNT 20.32

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-203876-10000
Amazon
Mailing Address 1516 2nd Ave
City Seattle State WA Zip Code 98101
Purpose of Disbursement: Event Supplies
Activity or Event Identifier: [MEMO ITEM] Memo Entry
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date
Date 01 / 17 / 2013
FEDERAL SHARE 10.16 + NONFEDERAL SHARE 10.16 = TOTAL AMOUNT 20.32

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 29660.16, 29660.16, 59320.32

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty)

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-203898	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 360001			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code Fort Lauderdale FL 33336			<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Catering/Facilities		Category/ Type	Allocated Activity or Event Year-To-Date 157880.17	
Activity or Event Identifier: PSP13			Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>	
See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	
20000.00			20000.00	
		=	TOTAL AMOUNT	
			40000.00	

B. Full Name (Last, First, Middle Initial) MARRIOTT 337W0WARDMN		Transaction ID : H4-203898-10000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 2660 WOODLEY RD NW			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code WASHINGTON DC 20008-4106			<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Catering/Facilities		Category/ Type	Allocated Activity or Event Year-To-Date	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	
20000.00			20000.00	
		=	TOTAL AMOUNT	
			40000.00	

C. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-203903	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 360001			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code Fort Lauderdale FL 33336			<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Office Supplies Expenses		Category/ Type	Allocated Activity or Event Year-To-Date 157987.53	
Activity or Event Identifier: PSP13			Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>	
See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	
53.68			53.68	
		=	TOTAL AMOUNT	
			107.36	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20053.68		20053.68		40107.36

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) STAPLES 00335		Transaction ID : H4-203903-10000		Allocated Activity or Event:	
Mailing Address 350 N BEDFORD RD				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code MOUNT KISCO NY 10549-1105				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Office Supplies Expenses				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 01 / 17 / 2013	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
53.68		53.68		107.36	

B. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-203904		Allocated Activity or Event:	
Mailing Address PO Box 360001				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code Fort Lauderdale FL 33336				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Publication & Dues				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: PSP13		Category/Type		Allocated Activity or Event Year-To-Date	
See Attached Memo Entry				Date 01 / 17 / 2013	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
24.20		24.20		48.40	

C. Full Name (Last, First, Middle Initial) NEW YORK TIMES		Transaction ID : H4-203904-10000		Allocated Activity or Event:	
Mailing Address 620 8TH AVE				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code NEW YORK NY 10018-1604				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Publication & Dues				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 01 / 17 / 2013	
FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	
24.20		24.20		48.40	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.20		24.20		48.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001		Transaction ID : H4-203905	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City Fort Lauderdale	State FL	Zip Code 33336	Allocated Activity or Event Year-To-Date 158228.19 Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	
Activity or Event Identifier: PSP13 See Attached Memo Entry			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="96.13"/>		<input type="text" value="96.13"/>	<input type="text" value="192.26"/>

B. Full Name (Last, First, Middle Initial) MTA MVM*14TH ST. - U Mailing Address 130 LIVINGSTON ST		Transaction ID : H4-203905-10000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City BROOKLYN	State NY	Zip Code 11201-5106	Allocated Activity or Event Year-To-Date Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="10.00"/>		<input type="text" value="0.00"/>	<input type="text" value="10.00"/>

C. Full Name (Last, First, Middle Initial) MTA MVM*14TH ST. - U Mailing Address 130 LIVINGSTON ST		Transaction ID : H4-203905-20000	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC
City BROOKLYN	State NY	Zip Code 11201-5106	Allocated Activity or Event Year-To-Date Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT			
<input type="text" value="10.00"/>		<input type="text" value="0.00"/>	<input type="text" value="10.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="96.13"/>		<input type="text" value="96.13"/>		<input type="text" value="192.26"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) METRO-NORTH TVM		Transaction ID : H4-203905-30000		Allocated Activity or Event:	
Mailing Address 347 MADISON AVE				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code NEW YORK NY 10017-3739				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 01 / 17 / 2013	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
10.75		0.00		10.75	

B. Full Name (Last, First, Middle Initial) METRO-NORTH TVM		Transaction ID : H4-203905-40000		Allocated Activity or Event:	
Mailing Address 347 MADISON AVE				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code NEW YORK NY 10017-3739				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 01 / 17 / 2013	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
142.50		0.00		142.50	

C. Full Name (Last, First, Middle Initial) NYC TAXI MED 2A24 09		Transaction ID : H4-203905-50000		Allocated Activity or Event:	
Mailing Address 330 MCGUINNESS BLVD				<input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City State Zip Code BROOKLYN NY 11222-1820				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Travel/Accommodation /Meals				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier:		Category/Type		Allocated Activity or Event Year-To-Date	
[MEMO ITEM] Memo Entry				Date 01 / 17 / 2013	
FEDERAL SHARE		+ NONFEDERAL SHARE		= TOTAL AMOUNT	
9.00		0.00		9.00	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-203905-60000
THE CITY BAKERY - NE
Mailing Address 3 W 18TH ST
City NEW YORK State NY Zip Code 10011-4610
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE -86.12 NONFEDERAL SHARE 96.13 TOTAL AMOUNT 10.01

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-203906
American Express
Mailing Address PO Box 360001
City Fort Lauderdale State FL Zip Code 33336
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier: PSP13
See Attached Memo Entry
FEDERAL SHARE 36.47 NONFEDERAL SHARE 36.47 TOTAL AMOUNT 72.94

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-203906-10000
WHOLEFDS PST 10135 0
Mailing Address 1440 P ST NW
City WASHINGTON State DC Zip Code 20005-1908
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 36.47 NONFEDERAL SHARE 36.47 TOTAL AMOUNT 72.94

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 36.47, 36.47, 72.94

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: American Express, Transaction ID: H4-203911. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies Expenses), Activity or Event Identifier (PSP13), and Allocated Activity or Event (Fundraising checked). Totals: FEDERAL SHARE 44.49, NONFEDERAL SHARE 44.50, TOTAL AMOUNT 88.99.

Form B: OFFICE DEPOT 000898, Transaction ID: H4-203911-10000. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Office Supplies Expenses), Activity or Event Identifier ([MEMO ITEM] Memo Entry), and Allocated Activity or Event (Fundraising checked). Totals: FEDERAL SHARE 44.49, NONFEDERAL SHARE 44.50, TOTAL AMOUNT 88.99.

Form C: American Express, Transaction ID: H4-203912. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Postage), Activity or Event Identifier (PSP13), and Allocated Activity or Event (Fundraising checked). Totals: FEDERAL SHARE 4.50, NONFEDERAL SHARE 4.50, TOTAL AMOUNT 9.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 48.99, NONFEDERAL SHARE 49.00, TOTAL AMOUNT 97.99.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-203912-10000 USPS 056817005707067		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1300 EVANS AVE		Allocated Activity or Event Year-To-Date _____		
City State Zip Code SAN FRANCISCO CA 94124-1760	Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>			
Purpose of Disbursement: Postage	<input type="text"/> Category/ Type	Allocated Activity or Event Year-To-Date _____		
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="4.50"/>		<input type="text" value="4.50"/>		<input type="text" value="9.00"/>

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-203913 American Express		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 360001		Allocated Activity or Event Year-To-Date _____		
City State Zip Code Fort Lauderdale FL 33335	Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>			
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/> Category/ Type	Allocated Activity or Event Year-To-Date _____		
Activity or Event Identifier: PSP13		Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>		
See Attached Memo Entry				
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="272.42"/>		<input type="text" value="272.42"/>		<input type="text" value="544.84"/>

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-203913-10000 ONLINECASADELMARSM		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3 GOODYEAR		Allocated Activity or Event Year-To-Date _____		
City State Zip Code Irvine CA 92618-2049	Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>			
Purpose of Disbursement: Travel/Accommodation /Meals	<input type="text"/> Category/ Type	Allocated Activity or Event Year-To-Date _____		
Activity or Event Identifier: [MEMO ITEM] Memo Entry		Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>		
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="12.00"/>		<input type="text" value="0.00"/>		<input type="text" value="12.00"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="272.42"/>		<input type="text" value="272.42"/>		<input type="text" value="544.84"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES (Transaction ID : H4-203913-20000 Mailing Address PO BOX 36611		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City DALLAS	State TX	Zip Code 75235	Allocated Activity or Event Year-To-Date _____ Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			
FEDERAL SHARE		+	NONFEDERAL SHARE
=		TOTAL AMOUNT	
<input type="text" value="212.80"/>		<input type="text" value="0.00"/>	
<input type="text" value="212.80"/>			

B. Full Name (Last, First, Middle Initial) Starbucks #09545 Mar Transaction ID : H4-203913-30000 Mailing Address LINCOLN & FIJI, MARINA DE		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City Marina del Rey	State CA	Zip Code 90292	Allocated Activity or Event Year-To-Date _____ Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			
FEDERAL SHARE		+	NONFEDERAL SHARE
=		TOTAL AMOUNT	
<input type="text" value="12.30"/>		<input type="text" value="0.00"/>	
<input type="text" value="12.30"/>			

C. Full Name (Last, First, Middle Initial) GREEN CHILE KITCHEN Transaction ID : H4-203913-40000 Mailing Address 1801 MCALLISTER ST		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
City SAN FRANCISCO	State CA	Zip Code 94115	Allocated Activity or Event Year-To-Date _____ Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>
Purpose of Disbursement: Travel/Accommodation /Meals		Category/ Type	
Activity or Event Identifier: [MEMO ITEM] Memo Entry			
FEDERAL SHARE		+	NONFEDERAL SHARE
=		TOTAL AMOUNT	
<input type="text" value="6.63"/>		<input type="text" value="0.00"/>	
<input type="text" value="6.63"/>			

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="0.00"/>		<input type="text" value="0.00"/>		<input type="text" value="0.00"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-203913-50000
NAPA FARMS MARKET
Mailing Address DOMESTIC TERMINAL 2
City SAN FRANCISCO State CA Zip Code 94128
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 4.10 NONFEDERAL SHARE 0.00 TOTAL AMOUNT 4.10

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-203913-60000
VIRGIN AMERICA
Mailing Address 555 AIRPORT BLVD
City SAN FRANCISCO State CA Zip Code 94010-2036
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 196.80 NONFEDERAL SHARE 0.00 TOTAL AMOUNT 196.80

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-203913-70000
Casa Del Mar Oceanfr
Mailing Address ATT: ACCOUNTS RECEIVABLE
City Santa Monica State CA Zip Code 90405-1083
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 74.06 NONFEDERAL SHARE 0.00 TOTAL AMOUNT 74.06

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-203913-80000
SM CITY PARKING METE
Mailing Address 1717 4TH ST
City SANTA MONICA State CA Zip Code 90401-3319
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 10.00 + NONFEDERAL SHARE 0.00 = TOTAL AMOUNT 10.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-203913-90000
PARK SFO PARK SFO
Mailing Address 237 HARBOR WAY
City SOUTH SAN FRANCI State CA Zip Code 94080-6811
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE -256.27 + NONFEDERAL SHARE 272.42 = TOTAL AMOUNT 16.15

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-203915
American Express
Mailing Address PO Box 360001
City Fort Lauderdale State FL Zip Code 33336
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier: PSP13
See Attached Memo Entry
FEDERAL SHARE 574.02 + NONFEDERAL SHARE 574.03 = TOTAL AMOUNT 1148.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 574.02, 574.03, 1148.05

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty)

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) AVIS RENT A CAR TOLL Mailing Address 9 PARK PL City State Zip Code Great Neck NY 11021-5030 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 10.25 0.00 10.25		Transaction ID : H4-203915-10000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 01 / 17 / 2013 Category/Type
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B. Full Name (Last, First, Middle Initial) AVIS RENT A CAR TOLL Mailing Address 9 PARK PL City State Zip Code Great Neck NY 11021-5030 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 10.40 0.00 10.40		Transaction ID : H4-203915-20000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 01 / 17 / 2013 Category/Type
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C. Full Name (Last, First, Middle Initial) BSP PETRO INC. 00037 Mailing Address 6100 S YALE AVE City State Zip Code DELAND FL 74136-1922 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 10.35 0.00 10.35		Transaction ID : H4-203915-30000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 01 / 17 / 2013 Category/Type
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SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: SHERATON ORLANDO NOR, Transaction ID: H4-203915-40000. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, and Allocated Activity or Event. Total Amount: 178.88.

Form B: SHERATON ORLANDO NOR, Transaction ID: H4-203915-50000. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, and Allocated Activity or Event. Total Amount: 225.26.

Form C: AMERICAN AIRLINES IN, Transaction ID: H4-203915-60000. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, and Allocated Activity or Event. Total Amount: 221.60.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-203915-70000
ORTANIQUE ON THE MIL
Mailing Address 278 MIRACLE MILE
City MIAMI State FL Zip Code 33134
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 135.03 + NONFEDERAL SHARE 0.00 = TOTAL AMOUNT 135.03

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-203915-80000
SABORE
Mailing Address 13005 SW 1ST RD
City NEWBERRY State FL Zip Code 32669-3265
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 138.42 + NONFEDERAL SHARE 0.00 = TOTAL AMOUNT 138.42

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-203915-90000
HARRY'S OF OCALA 002
Mailing Address 24 SE 1ST AVE
City OCALA State FL Zip Code 34471-2152
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 40.71 + NONFEDERAL SHARE 0.00 = TOTAL AMOUNT 40.71

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Full Name (Last, First, Middle Initial) AVIS RENT A CAR, Transaction ID : H4-203915-100000, Allocated Activity or Event: Fundraising, Date: 01/17/2013, FEDERAL SHARE: 159.29, NONFEDERAL SHARE: 0.00, TOTAL AMOUNT: 159.29

Form B: Full Name (Last, First, Middle Initial) LE PAIN QUOTIDIEN, Transaction ID : H4-203915-110000, Allocated Activity or Event: Fundraising, Date: 01/17/2013, FEDERAL SHARE: -556.17, NONFEDERAL SHARE: 574.03, TOTAL AMOUNT: 17.86

Form C: Full Name (Last, First, Middle Initial) American Express, Transaction ID : H4-203919, Allocated Activity or Event: Fundraising, Date: 01/17/2013, FEDERAL SHARE: 7.19, NONFEDERAL SHARE: 7.19, TOTAL AMOUNT: 14.38

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 7.19, 7.19, 14.38

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-203919-10000
STAPLES 01612
Mailing Address 1509 WAUKEGAN RD
City GLENVIEW State IL Zip Code 60025-2122
Purpose of Disbursement: Office Supplies Expenses
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 7.19 NONFEDERAL SHARE 7.19 TOTAL AMOUNT 14.38

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-203920
American Express
Mailing Address PO Box 360001
City Fort Lauderdale State FL Zip Code 33336
Purpose of Disbursement: Parking Fees
Activity or Event Identifier: PSP13
See Attached Memo Entry
FEDERAL SHARE 17.50 NONFEDERAL SHARE 17.50 TOTAL AMOUNT 35.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-203920-10000
SOUTH LOOP GPRK01010
Mailing Address 318 S FEDERAL ST
City CHICAGO State IL Zip Code 60604-3603
Purpose of Disbursement: Parking Fees
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 27.00 NONFEDERAL SHARE 0.00 TOTAL AMOUNT 27.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 17.50, 17.50, 35.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-203920-20000 PARKING METER ZONE 4		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5 S. COLUMBUS DR.		Allocated Activity or Event Year-To-Date _____	
City CHICAGO State IL Zip Code 60603	Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>		
Purpose of Disbursement: Parking Fees	Category/Type <input type="text"/>	Allocated Activity or Event Year-To-Date _____	
Activity or Event Identifier:		Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>	
[MEMO ITEM] Memo Entry			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
6.00		0.00	6.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-203920-30000 PARKING METER ZONE 3		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5 S. COLUMBUS DR.		Allocated Activity or Event Year-To-Date _____	
City CHICAGO State IL Zip Code 60603	Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>		
Purpose of Disbursement: Parking Fees	Category/Type <input type="text"/>	Allocated Activity or Event Year-To-Date _____	
Activity or Event Identifier:		Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>	
[MEMO ITEM] Memo Entry			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
-15.50		17.50	2.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-203921 American Express		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001		Allocated Activity or Event Year-To-Date _____ 160158.39	
City Fort Lauderdale State FL Zip Code 33336	Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>		
Purpose of Disbursement: Travel/Accommodation /Meals	Category/Type <input type="text"/>	Allocated Activity or Event Year-To-Date _____	
Activity or Event Identifier: PSP13		Date <input type="text" value="01"/> / <input type="text" value="17"/> / <input type="text" value="2013"/>	
See Attached Memo Entry			
FEDERAL SHARE	+	NONFEDERAL SHARE	= TOTAL AMOUNT
8.50		8.50	17.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.50		8.50		17.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4-203921-10000. Allocated Activity or Event: Administrative, Fundraising, Exempt, Voter Drive, Direct Candidate Support, Public Comm. Date: 01/17/2013. Amounts: FEDERAL SHARE 8.50, NONFEDERAL SHARE 8.50, TOTAL AMOUNT 17.00.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4-203922. Allocated Activity or Event: Administrative, Fundraising, Exempt, Voter Drive, Direct Candidate Support, Public Comm. Date: 01/17/2013. Amounts: FEDERAL SHARE 18.25, NONFEDERAL SHARE 18.25, TOTAL AMOUNT 36.50.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4-203922-10000. Allocated Activity or Event: Administrative, Fundraising, Exempt, Voter Drive, Direct Candidate Support, Public Comm. Date: 01/17/2013. Amounts: FEDERAL SHARE 18.25, NONFEDERAL SHARE 18.25, TOTAL AMOUNT 36.50.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 18.25, 18.25, 36.50.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-203923
American Express
Mailing Address P.O. BOX 360001
City State Zip Code
Fort Lauderdale FL 33336
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier: PSP13
See Attached Memo Entry
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 160462.39
Date 01 / 17 / 2013
FEDERAL SHARE 133.75 + NONFEDERAL SHARE 133.75 = TOTAL AMOUNT 267.50

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-203923-10000
UBER TECHNOLOGIES IN
Mailing Address 182 HOWARD ST
City State Zip Code
SAN FRANCISCO CA 94105-1611
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier: [MEMO ITEM] Memo Entry
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date
Date 01 / 17 / 2013
FEDERAL SHARE 80.00 + NONFEDERAL SHARE 0.00 = TOTAL AMOUNT 80.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-203923-20000
UBER TECHNOLOGIES IN
Mailing Address 182 HOWARD ST
City State Zip Code
SAN FRANCISCO CA 94105-1611
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier: [MEMO ITEM] Memo Entry
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date
Date 01 / 17 / 2013
FEDERAL SHARE 15.00 + NONFEDERAL SHARE 0.00 = TOTAL AMOUNT 15.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 133.75, 133.75, 267.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Transaction ID H4-203923-30000. Disbursement to UBER TECHNOLOGIES IN, SAN FRANCISCO, CA. Amount: 22.00. Purpose: Travel/Accommodation /Meals. Date: 01/17/2013.

Form B: Transaction ID H4-203923-40000. Disbursement to UBER TECHNOLOGIES IN, SAN FRANCISCO, CA. Amount: 18.00. Purpose: Travel/Accommodation /Meals. Date: 01/17/2013.

Form C: Transaction ID H4-203923-50000. Disbursement to UBER TECHNOLOGIES IN, SAN FRANCISCO, CA. Amount: 28.00. Purpose: Travel/Accommodation /Meals. Date: 01/17/2013.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 0.00, NONFEDERAL SHARE 0.00, TOTAL AMOUNT 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) BEST BUY 516 Mailing Address 975 N POINT PKWY City ALPHARETTA State GA Zip Code 30005-4135 Purpose of Disbursement: Office Supplies Expenses Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-203923-60000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 01 / 17 / 2013 Category/Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 53.49 + 0.00 = 53.49
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B. Full Name (Last, First, Middle Initial) BOLOCO 19TH ST ONLIN Mailing Address 2 PARK PLAZA SUITE 205 City BOSTON State MA Zip Code 02116 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-203923-70000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 01 / 17 / 2013 Category/Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 30.71 + 0.00 = 30.71
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C. Full Name (Last, First, Middle Initial) 1724 L ST AUBONPAIN Mailing Address 1724 L ST NW City WASHINGTON State DC Zip Code 20036-5406 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry		Transaction ID : H4-203923-80000 Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date 01 / 17 / 2013 Category/Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT -113.45 + 133.75 = 20.30
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SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: American Express, Transaction ID: H4-203924. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Deliveries), Activity or Event Identifier (PSP13), and Allocated Activity or Event (Fundraising checked). Totals: FEDERAL SHARE 32.30, NONFEDERAL SHARE 32.31, TOTAL AMOUNT 64.61.

Form B: PROFLOWERS.COM, Transaction ID: H4-203924-10000. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Deliveries), Activity or Event Identifier ([MEMO ITEM] Memo Entry), and Allocated Activity or Event (Fundraising checked). Totals: FEDERAL SHARE 32.30, NONFEDERAL SHARE 32.31, TOTAL AMOUNT 64.61.

Form C: American Express, Transaction ID: H4-203925. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Travel/Accommodation /Meals), Activity or Event Identifier (PSP13), and Allocated Activity or Event (Fundraising checked). Totals: FEDERAL SHARE 347.46, NONFEDERAL SHARE 347.46, TOTAL AMOUNT 694.92.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 379.76, NONFEDERAL SHARE 379.77, TOTAL AMOUNT 759.53.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-203925-10000
HOTELS.COM US1111936
Mailing Address 333 108TH AVE NE
City Bellevue State NV Zip Code 98004-5736
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 413.99 + NONFEDERAL SHARE 0.00 = TOTAL AMOUNT 413.99

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-203925-20000
NYC-TAXI VERIFONE NY
Mailing Address 3703 21ST ST
City LONG ISLAND CITY State NY Zip Code 11101-3502
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 8.90 + NONFEDERAL SHARE 0.00 = TOTAL AMOUNT 8.90

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-203925-30000
HUDSON NEWS 13 PENN
Mailing Address 8TH AVE -PENN STN TKT LVL
City NEW YORK State NY Zip Code 10001
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE -75.43 + NONFEDERAL SHARE 81.19 = TOTAL AMOUNT 5.76

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-203925-40000
HUDSON NEWS 13 PENN
Mailing Address 8TH AVE -PENN STN TKT LVL

City NEW YORK State NY Zip Code 10001

Purpose of Disbursement: Travel/Accommodation /Meals

Activity or Event Identifier:

[MEMO ITEM] Memo Entry

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 01 / 17 / 2013

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.25		0.00		2.25

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-203925-50000
COOPER'S TAVERN
Mailing Address 481 8TH AVE

City NYC State NY Zip Code 10001-1809

Purpose of Disbursement: Travel/Accommodation /Meals

Activity or Event Identifier:

[MEMO ITEM] Memo Entry

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 01 / 17 / 2013

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.56		0.00		44.56

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-203925-60000
OPEN CITY 8843002350
Mailing Address 2331 CALVERT ST NW

City WASHINGTON State DC Zip Code 20008-2622

Purpose of Disbursement: Travel/Accommodation /Meals

Activity or Event Identifier:

[MEMO ITEM] Memo Entry

Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

Date 01 / 17 / 2013

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.96		0.00		38.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4-203925-70000. Allocated Activity or Event: Fundraising. AMTRAK NRTHEAST CAFE. Mailing Address 60 MASSACHUSETTS AVE NE. City WASHINGTON State DC Zip Code 20002-4285. Purpose of Disbursement: Travel/Accommodation /Meals. Date 01/17/2013. FEDERAL SHARE 7.25, NONFEDERAL SHARE 0.00, TOTAL AMOUNT 7.25.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4-203925-80000. Allocated Activity or Event: Fundraising. AMTRAK NRTHEAST CAFE. Mailing Address 60 MASSACHUSETTS AVE NE. City WASHINGTON State DC Zip Code 20002-4285. Purpose of Disbursement: Travel/Accommodation /Meals. Date 01/17/2013. FEDERAL SHARE 9.25, NONFEDERAL SHARE 0.00, TOTAL AMOUNT 9.25.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4-203925-90000. Allocated Activity or Event: Fundraising. AMTRAK. Mailing Address 60 MASSACHUSETTS AVE NE. City WASHINGTON State DC Zip Code 20002. Purpose of Disbursement: Travel/Accommodation /Meals. Date 01/17/2013. FEDERAL SHARE -102.27, NONFEDERAL SHARE 266.27, TOTAL AMOUNT 164.00.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Full Name (Last, First, Middle Initial) Adelstein Liston, Transaction ID : H4-203988, Allocated Activity or Event: Fundraising, Date: 01/24/2013, Total Amount: 20000.00

Form B: Full Name (Last, First, Middle Initial) Emily Beardsley, Transaction ID : H4-203991, Allocated Activity or Event: Fundraising, Date: 01/24/2013, Total Amount: 31.09

Form C: Full Name (Last, First, Middle Initial) CVS, Transaction ID : H4-203991-10000, Allocated Activity or Event: Fundraising, Date: 01/24/2013, Total Amount: 31.09

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 10015.54, 10015.55, 20031.09

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-203992
Emily Beardsley
Mailing Address 1776 Lanier Place NW #5C
City Washington State DC Zip Code 20009
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 181404.01
Date 01 / 24 / 2013
FEDERAL SHARE 75.50 + NONFEDERAL SHARE 75.50 = TOTAL AMOUNT 151.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-203997
Emily Clack Photography LLC
Mailing Address 1818 Riggs Place NW Apt 210
City Washington State DC Zip Code 20009
Purpose of Disbursement: Temporary Help
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 181854.01
Date 01 / 24 / 2013
FEDERAL SHARE 225.00 + NONFEDERAL SHARE 225.00 = TOTAL AMOUNT 450.00

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-203998
Lindsay Hicks
Mailing Address 955 South Columbus Street #120
City Arlington State VA Zip Code 22204
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 181915.51
Date 01 / 24 / 2013
FEDERAL SHARE 30.75 + NONFEDERAL SHARE 30.75 = TOTAL AMOUNT 61.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 331.25, 331.25, 662.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Miller's Office Products, Inc. Transaction ID: H4-204002. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Event Supplies), Activity or Event Identifier (PSP13), Allocated Activity or Event (Fundraising checked), and Year-To-Date amounts (182145.48).

Form B: Kali Murphy Transaction ID: H4-204004. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Travel/Accommodation /Meals), Activity or Event Identifier (PSP13), Allocated Activity or Event (Fundraising checked), and Year-To-Date amounts (182181.48).

Form C: Pitts Piano LLC Transaction ID: H4-204005. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Consulting Fundraising), Activity or Event Identifier (PSP13), Allocated Activity or Event (Fundraising checked), and Year-To-Date amounts (182316.48).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE (200.48) + NONFEDERAL SHARE (200.49) = TOTAL AMOUNT (400.97)

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Tamara Robertson		Transaction ID : H4-204008	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5711 Old Temple Hill Rd			Allocated Activity or Event Year-To-Date 182541.48	
City Temple Hills	State MD	Zip Code 20748	Date 01 / 24 / 2013	
Purpose of Disbursement: Temporary Help		Category/ Type	Date 01 / 24 / 2013	
Activity or Event Identifier: PSP13				
FEDERAL SHARE		+	NONFEDERAL SHARE	
112.50			112.50	
		=	TOTAL AMOUNT	
			225.00	

B. Full Name (Last, First, Middle Initial) Soundpath Conferencing c/o American Teleconferencing Services		Transaction ID : H4-204009	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 405808			Allocated Activity or Event Year-To-Date 189094.56	
City Atlanta	State GA	Zip Code 30384	Date 01 / 24 / 2013	
Purpose of Disbursement: Meeting/Conference		Category/ Type	Date 01 / 24 / 2013	
Activity or Event Identifier: PSP13				
FEDERAL SHARE		+	NONFEDERAL SHARE	
3276.54			3276.54	
		=	TOTAL AMOUNT	
			6553.08	

C. Full Name (Last, First, Middle Initial) American Express		Transaction ID : H4-204166	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 360001			Allocated Activity or Event Year-To-Date 325867.61	
City Fort Lauderdale	State FL	Zip Code 33336	Date 01 / 24 / 2013	
Purpose of Disbursement: Catering/Facilities		Category/ Type	Date 01 / 24 / 2013	
Activity or Event Identifier: PSP13				
See Attached Memo Entry				
FEDERAL SHARE		+	NONFEDERAL SHARE	
68386.52			68386.53	
		=	TOTAL AMOUNT	
			136773.05	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
71775.56		71775.57		143551.13

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-204166-10000
MARRIOTT 337W0WARDMN
Mailing Address 2660 WOODLEY RD NW
City WASHINGTON State DC Zip Code 20008-4106
Purpose of Disbursement: Catering/Facilities
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
68386.52 68386.53 136773.05

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-204167
American Express
Mailing Address PO Box 360001
City Fort Lauderdale State FL Zip Code 33336
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier: PSP13
See Attached Memo Entry
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
287.49 287.49 574.98

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-204167-10000
ROTI MEDITERRANEAN #
Mailing Address 1629 K ST NW
City WASHINGTON State DC Zip Code 20006
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
48.95 48.95 97.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 287.49, 287.49, 574.98

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4-204167-20000. Allocated Activity or Event: Administrative, Fundraising, Exempt, Voter Drive, Direct Candidate Support, Public Comm. Date: 01/24/2013. Amounts: FEDERAL SHARE 158.75, NONFEDERAL SHARE 158.75, TOTAL AMOUNT 317.50.

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4-204167-30000. Allocated Activity or Event: Administrative, Fundraising, Exempt, Voter Drive, Direct Candidate Support, Public Comm. Date: 01/24/2013. Amounts: FEDERAL SHARE 30.03, NONFEDERAL SHARE 30.02, TOTAL AMOUNT 60.05.

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4-204167-40000. Allocated Activity or Event: Administrative, Fundraising, Exempt, Voter Drive, Direct Candidate Support, Public Comm. Date: 01/24/2013. Amounts: FEDERAL SHARE 17.95, NONFEDERAL SHARE 17.94, TOTAL AMOUNT 35.89.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 0.00, 0.00, 0.00.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: (empty), (empty), (empty).

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-204167-50000
STAPLES 01532
Mailing Address 1901 L ST NW
City WASHINGTON State DC Zip Code 20036-3509
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 31.81 NONFEDERAL SHARE 31.83 TOTAL AMOUNT 63.64

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-204025
Erica Best
Mailing Address 221 Seaton Place, NE
City Washington State DC Zip Code 20002
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier: PSP13
FEDERAL SHARE 18.70 NONFEDERAL SHARE 18.70 TOTAL AMOUNT 37.40

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-204028
Capitol Prompting Service
Mailing Address PO Box 25024
City Arlington State VA Zip Code 22202
Purpose of Disbursement: Event Supplies
Activity or Event Identifier: PSP13
FEDERAL SHARE 412.50 NONFEDERAL SHARE 412.50 TOTAL AMOUNT 825.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 431.20, 431.20, 862.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Full Name (Last, First, Middle Initial) Capitol Prompting Service, Transaction ID : H4-204029, Allocated Activity or Event: Fundraising, Date: 01/31/2013, Total Amount: 30.00

Form B: Full Name (Last, First, Middle Initial) Lizzie Cooper, Transaction ID : H4-204030, Allocated Activity or Event: Fundraising, Date: 01/31/2013, Total Amount: 165.26

Form C: Full Name (Last, First, Middle Initial) Cornucopia, Inc., Transaction ID : H4-204031, Allocated Activity or Event: Fundraising, Date: 01/31/2013, Total Amount: 4000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 2097.63, 2097.63, 4195.26

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4-204032 Allocated Activity or Event: Cornucopia, Inc. Mailing Address 7510 Hamilton Spring Road City Bethesda State MD Zip Code 20817 Purpose of Disbursement: Deliveries Activity or Event Identifier: PSP13 Date 01/31/2013 Total Amount 167.63

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4-204033 Allocated Activity or Event: Cornucopia, Inc. Mailing Address 7510 Hamilton Spring Road City Bethesda State MD Zip Code 20817 Purpose of Disbursement: Design/Graphics Activity or Event Identifier: PSP13 Date 01/31/2013 Total Amount 505.00

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4-204034 Allocated Activity or Event: Cornucopia, Inc. Mailing Address 7510 Hamilton Spring Road City Bethesda State MD Zip Code 20817 Purpose of Disbursement: Equipment Rental Activity or Event Identifier: PSP13 Date 01/31/2013 Total Amount 301.46

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 487.04, 487.05, 974.09

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Cornucopia, Inc.		Transaction ID : H4-204035	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 7510 Hamilton Spring Road			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code Bethesda MD 20817			<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Equipment Rental			Allocated Activity or Event Year-To-Date 347268.97	
Activity or Event Identifier: PSP13		Category/ Type	Date M M M / D D D / Y Y Y Y Y Y 01 31 2013	
FEDERAL SHARE		+	NONFEDERAL SHARE	
7397.31			7397.32	
		=	TOTAL AMOUNT	
			14794.63	

B. Full Name (Last, First, Middle Initial) Cornucopia, Inc.		Transaction ID : H4-204036	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 7510 Hamilton Spring Road			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code Bethesda MD 20817			<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Event Supplies			Allocated Activity or Event Year-To-Date 350134.01	
Activity or Event Identifier: PSP13		Category/ Type	Date M M M / D D D / Y Y Y Y Y Y 01 31 2013	
FEDERAL SHARE		+	NONFEDERAL SHARE	
1432.52			1432.52	
		=	TOTAL AMOUNT	
			2865.04	

C. Full Name (Last, First, Middle Initial) Cornucopia, Inc.		Transaction ID : H4-204037	Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 7510 Hamilton Spring Road			<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City State Zip Code Bethesda MD 20817			<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Printing			Allocated Activity or Event Year-To-Date 350336.23	
Activity or Event Identifier: PSP13		Category/ Type	Date M M M / D D D / Y Y Y Y Y Y 01 31 2013	
FEDERAL SHARE		+	NONFEDERAL SHARE	
101.11			101.11	
		=	TOTAL AMOUNT	
			202.22	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8930.94		8930.95		17861.89

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Full Name (Last, First, Middle Initial) Transaction ID : H4-204038 Allocated Activity or Event: Cornucopia, Inc. Mailing Address 7510 Hamilton Spring Road City Bethesda State MD Zip Code 20817 Purpose of Disbursement: Printing Activity or Event Identifier: PSP13

Form B: Full Name (Last, First, Middle Initial) Transaction ID : H4-204039 Allocated Activity or Event: Cornucopia, Inc. Mailing Address 7510 Hamilton Spring Road City Bethesda State MD Zip Code 20817 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: PSP13

Form C: Full Name (Last, First, Middle Initial) Transaction ID : H4-204043 Allocated Activity or Event: Integram Mailing Address 22695 Commerce Center Ct City Dulles State VA Zip Code 20166 Purpose of Disbursement: Deliveries Activity or Event Identifier: PSP13

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 434.18, 434.19, 868.37

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-204044
Integram
Mailing Address 22695 Commerce Center Ct
City Dulles State VA Zip Code 20166
Purpose of Disbursement: Printing
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 352094.60
Date 01 / 31 / 2013
FEDERAL SHARE 445.00 + NONFEDERAL SHARE 445.00 = TOTAL AMOUNT 890.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-204054
Mud Productions LLC
Mailing Address 2631 Jamestown Lane #401
City Alexandria State VA Zip Code 22314
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 352840.10
Date 01 / 31 / 2013
FEDERAL SHARE 372.75 + NONFEDERAL SHARE 372.75 = TOTAL AMOUNT 745.50

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-204063
Pat Reynes
Mailing Address 2601 Glenview Rd
City Glenview State IL Zip Code 60025
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier: PSP13
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 353077.90
Date 01 / 31 / 2013
FEDERAL SHARE 118.90 + NONFEDERAL SHARE 118.90 = TOTAL AMOUNT 237.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 936.65, 936.65, 1873.30

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Empty], [Empty], [Empty]

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Production Solutions, Inc. Transaction ID: H4-204065. Allocated Activity or Event: Fundraising. Purpose: Deliveries. Date: 01/31/2013. Total Amount: 50.00.

Form B: Production Solutions, Inc. Transaction ID: H4-204066. Allocated Activity or Event: Fundraising. Purpose: Printing. Date: 01/31/2013. Total Amount: 2103.16.

Form C: Production Solutions, Inc. Transaction ID: H4-204067. Allocated Activity or Event: Fundraising. Purpose: Postage Credit. Date: 01/31/2013. Total Amount: -680.29.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 736.44, 736.43, 1472.87.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: [Blank], [Blank], [Blank].

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Production Solutions, Inc. Transaction ID: H4-204068. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Printing), Activity or Event Identifier (PSP13), Allocated Activity or Event (Fundraising checked), and Year-To-Date amounts (Total: 981.18).

Form B: Philippa Tarrant Custom Floral LLC Transaction ID: H4-204073. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Event Supplies), Activity or Event Identifier (PSP13), Allocated Activity or Event (Fundraising checked), and Year-To-Date amounts (Total: 14300.00).

Form C: Shark Bay, Inc Transaction ID: H4-204075. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Design/Graphics), Activity or Event Identifier (PSP13), Allocated Activity or Event (Fundraising checked), and Year-To-Date amounts (Total: 6000.00).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 10640.59, NONFEDERAL SHARE 10640.59, TOTAL AMOUNT 21281.18.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for total: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT.

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Transaction ID : H4-204076 Shellie Levin Solutions, Inc		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 22800 SW 157 Ave		Allocated Activity or Event Year-To-Date 393331.95	
City State Zip Code Miami FL 33170	Category/ Type	Date <input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>	
Purpose of Disbursement: Consulting Fundraising		Allocated Activity or Event Year-To-Date 8750.00	
Activity or Event Identifier: PSP13		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 8750.00 + 8750.00 = 17500.00	

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-204077 Shellie Levin Solutions, Inc		Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 22800 SW 157 Ave		Allocated Activity or Event Year-To-Date 393724.70	
City State Zip Code Miami FL 33170	Category/ Type	Date <input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>	
Purpose of Disbursement: Travel/Accommodation /Meals		Allocated Activity or Event Year-To-Date 196.37	
Activity or Event Identifier: PSP13		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 196.37 + 196.38 = 392.75	

C. Full Name (Last, First, Middle Initial)		Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address		Allocated Activity or Event Year-To-Date	
City State Zip Code	Category/ Type	Date	
Purpose of Disbursement: Activity or Event Identifier:		Allocated Activity or Event Year-To-Date	
FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT		FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8946.37		8946.38		17892.75

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
196862.30		196862.40		393724.70