

# 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**  
Washington Women for Choice

ADDRESS (number and street) 603 Stewart Street  
Suite 819  
Seattle WA 98101  
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00368332 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [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 [MM] / [DD] / [YYYY] 02 / 01 / 2020 through [MM] / [DD] / [YYYY] 02 / 29 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Newman, Tracy, , ,  
Type or Print Name of Treasurer

Signature of Treasurer Newman, Tracy, , , [Electronically Filed] Date [MM] / [DD] / [YYYY] 03 / 04 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Washington Women for Choice

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="2020"/>		36448.35
(b) Cash on Hand at Beginning of Reporting Period.....	54367.38	
(c) Total Receipts (from Line 19) .....	28000.00	46500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	82367.38	82948.35
7. Total Disbursements (from Line 31).....	10914.47	11495.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	71452.91	71452.91
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Washington Women for Choice**

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).....	28000.00	46500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	28000.00	46500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	28000.00	46500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total 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)).....▶	28000.00	46500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	28000.00	46500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	914.47	1495.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	914.47	1495.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	10914.47	11495.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10914.47	11495.44

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	28000.00	46500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	28000.00	46500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	914.47	1495.44
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	914.47	1495.44

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 11
	(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

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)  
**Washington Women for Choice**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Brookshire, Alexandra, , ,**

Mailing Address 250 39th Ave

City Seattle	State WA	Zip Code 98112
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Self	Occupation (for Individual) Attorney
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
02 / 01 / 2020

**Transaction ID : SA11AI.4823**

Amount of Each Receipt this Period  
2500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Cramer, Theiline, , ,**

Mailing Address 265 Maiden Ln E

City Seattle	State WA	Zip Code 98112
-----------------	-------------	-------------------

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

Name of Employer (for Individual) None	Occupation (for Individual) Homemaker
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
02 / 14 / 2020

**Transaction ID : SA11AI.4838**

Amount of Each Receipt this Period  
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Eakes, Pamela, , ,**

Mailing Address 2015 34th Ave S

City Seattle	State WA	Zip Code 98144
-----------------	-------------	-------------------

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

Name of Employer (for Individual) None	Occupation (for Individual) Retired
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 11 / 2020

**Transaction ID : SA11AI.4836**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 11
	<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)  
**Washington Women for Choice**

**A. Ferguson, Ellen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1414 41st Ave E  
 City Seattle State WA Zip Code 98112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Burke Museum Museum Administrator  
 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  
 02 / 04 / 2020  
**Transaction ID : SA11AI.4828**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**B. Gardow, Kathryn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5063 Harold Place, NE  
 City Seattle State WA Zip Code 98105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Kathryn Gardow & Associates Consultant  
 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  
 02 / 06 / 2020  
**Transaction ID : SA11AI.4833**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item

**C. O'Neill, Maura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2020 E Galer St  
 City Seattle State WA Zip Code 98112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Self Political Consultant  
 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  
 02 / 01 / 2020  
**Transaction ID : SA11AI.4826**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 11
	<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)  
**Washington Women for Choice**

**A. Pencke, Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4517 33rd Ave S  
 City Seattle State WA Zip Code 98118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Non-Profit Consultant  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1500.00**

Date of Receipt **02 / 05 / 2020**  
**Transaction ID : SA11AI.4830**  
 Amount of Each Receipt this Period **1500.00**  
 Memo Item

**B. Riley, Roberta, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1116 Grand Avenue  
 City Seattle State WA Zip Code 98122-3516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Planned Parenthood Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **3500.00**

Date of Receipt **02 / 06 / 2020**  
**Transaction ID : SA11AI.4831**  
 Amount of Each Receipt this Period **3500.00**  
 Memo Item

**C. Rozner, Evelyne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1500 4th Avenue  
 City Seattle State WA Zip Code 98101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2500.00**

Date of Receipt **02 / 18 / 2020**  
**Transaction ID : SA11AI.4839**  
 Amount of Each Receipt this Period **2500.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>7500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

FOR LINE NUMBER: PAGE 9 OF 11  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**Washington Women for Choice**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Weinberger-Glasser, Michele, , ,**

Mailing Address **7416 W Mercer Way**

City **Mercer Island**   State **WA**   Zip Code **98040**

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

Name of Employer (for Individual) **Microsoft**   Occupation (for Individual) **Human Resources**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2500.00**

Date of Receipt  
**02 / 06 / 2020**

**Transaction ID : SA11AI.4834**

Amount of Each Receipt this Period  
**2500.00**

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City   State   Zip Code

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

Name of Employer (for Individual)   Occupation (for Individual)

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City   State   Zip Code

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

Name of Employer (for Individual)   Occupation (for Individual)

Receipt For:  
 Primary    General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>28000.00</b>

**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"/> 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)

Washington Women for Choice

Full Name (Last, First, Middle Initial)

**A. Network Merchants Inc**

Mailing Address 201 Main Street

City  
Roselle

State  
IL

Zip Code  
60172

Purpose of Disbursement  
Credit Card Processing

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
02		03		2020

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.4817**  
Amount of Each Disbursement this Period  
[ ] 656.27

Memo Item

Full Name (Last, First, Middle Initial)

**B. Network Merchants Inc**

Mailing Address 201 Main Street

City  
Roselle

State  
IL

Zip Code  
60172

Purpose of Disbursement  
Credit Card Processing

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
02		06		2020

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.4818**  
Amount of Each Disbursement this Period  
[ ] 8.20

Memo Item

Full Name (Last, First, Middle Initial)

**C. Seattle CFO LLC**

Mailing Address 603 Stewart St  
#819

City  
Seattle

State  
WA

Zip Code  
98101

Purpose of Disbursement  
Accounting/Compliance

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
02		06		2020

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.4819**  
Amount of Each Disbursement this Period  
[ ] 250.00

Memo Item

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

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

914.47
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914.47
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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 checked="" type="checkbox"/> 23	<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)

**Washington Women for Choice**

Full Name (Last, First, Middle Initial)

**A. KENTUCKY STATE DEMOCRATIC CENTRAL EXECUTIVE COMMITTEE**

Mailing Address PO BOX 694

City  
FRANKFORT

State  
KY

Zip Code  
40602

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2020

FEC Identification Number

C C00011197

**Transaction ID : SB23.4821**

Amount of Each Disbursement this Period

10000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

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 Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

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 Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

10000.00

10000.00