

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2008 DEC -5 PM 1:36

Office Use Only

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

ADDRESS (number and street) 1600 WILSON BLVD. SUITE 801 ARLINGTON VA 22209

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE 00377168 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) OR [] AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 10/16/2008 through 11/24/2008

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 ELEANOR SMEAL, ASSISTANT TREASURER Signature of Treasurer [Signature] Date 12/04/2008

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

28039942579

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

FEMINIST MAJORITY PAC

Report Covering the Period:

From:

To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2008"/>		<input type="text" value="5,105.50"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="30,019.94"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4,787.00"/>	<input type="text" value="4,780.01"/>
(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="34,806.94"/>	<input type="text" value="52,913.51"/>
7. Total Disbursements (from Line 31)	<input type="text" value="29,151.14"/>	<input type="text" value="47,257.71"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<input type="text" value="5,655.80"/>	<input type="text" value="5,655.80"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0"/>	



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

28039942580

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

FEMINIST MAJORITY PAC

Report Covering the Period:

From:

10 / 16 / 2008

To:

11 / 24 / 2008

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).....

22,350.00

22,285.00

(ii) Unitemized.....

2,552.00

2,542.30

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

47,870.00

47,768.00

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

0

100.00

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

47,870.00

47,808.00

12. Transfers From Affiliated/Other Party Committees.....

0

0

13. All Loans Received.....

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0

0

17. Other Federal Receipts (Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

47,870.00

47,808.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

47,870.00

47,808.00

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	151.14	7757.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	151.14	7757.71
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	29,000.00	39,500.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	29,151.14	47,257.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29,151.14	47,257.71

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DETAILED SUMMARY PAGE
of Disbursements

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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)	478,700	478,808.01
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	478,700	478,808.01
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	151,14	775,741
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	151,14	775,741

28039942583

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

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

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 17

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. <i>BANK OF AMERICA MERCHANT SERVICES</i>		Date of Disbursement
Mailing Address <i>P.O. Box 2485</i>		<input type="text" value="MM"/> <input type="text" value="DD"/> <input type="text" value="YYYY"/>
City <i>SPokane</i>	State <i>WA</i>	Amount of Each Disbursement this Period
Zip Code <i>99210</i>		
Purpose of Disbursement <i>CREDIT CARD fees</i>		<input type="text" value="Amount"/>
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) ▼	<input type="text" value="5879"/>
State: _____ District: _____	Category/Type <input type="text" value="003"/>	

B. <i>PAYPAL INC.</i>		Date of Disbursement
Mailing Address <i>7100 SOLUTIONS CENTER</i>		<input type="text" value="MM"/> <input type="text" value="DD"/> <input type="text" value="YYYY"/>
City <i>CHICAGO</i>	State <i>IL</i>	Amount of Each Disbursement this Period
Zip Code <i>60677</i>		
Purpose of Disbursement <i>MONTHLY TRANSACTION FEE</i>		<input type="text" value="Amount"/>
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) ▼	<input type="text" value="5410"/>
State: _____ District: _____	Category/Type <input type="text" value="003"/>	

C.		Date of Disbursement
Mailing Address		<input type="text" value="MM"/> <input type="text" value="DD"/> <input type="text" value="YYYY"/>
City	State	Amount of Each Disbursement this Period
Zip Code		
Purpose of Disbursement		<input type="text" value="Amount"/>
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) ▼	<input type="text" value="Amount"/>
State: _____ District: _____	Category/Type	

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

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

28039942585

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE <u>9</u> OF <u>17</u>
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY PAC

A. MARKEY for CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address: **419 CANYON AVENUE**

City: **FT. COLLINS** State: **CO** Zip Code: **80521**

Purpose of Disbursement: **CONTRIBUTION** Category/Type: **011**

Candidate Name: **BETSY MARKEY**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **CO** District: **4**

Date of Disbursement: **10/16/2008**

Amount of Each Disbursement this Period: **1,000.00**

B. CHRISTINE JENNINGS 2008

Full Name (Last, First, Middle Initial)

Mailing Address: **P.O. BOX 49136**

City: **SARASOTA** State: **FL** Zip Code: **34230**

Purpose of Disbursement: **CONTRIBUTION** Category/Type: **011**

Candidate Name: **CHRISTINE JENNINGS**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **FL** District: **13**

Date of Disbursement: **10/16/2008**

Amount of Each Disbursement this Period: **1,000.00**

C. KOSMAS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address: **P.O. BOX 1547**

City: **NEW SMYRNA BEACH, FL** State: **FL** Zip Code: **32170**

Purpose of Disbursement: **CONTRIBUTION** Category/Type: **011**

Candidate Name: **SUZANNE KOSMAS**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **FL** District: **24**

Date of Disbursement: **10/16/2008**

Amount of Each Disbursement this Period: **1,000.00**

SUBTOTAL of Disbursements This Page (optional).....▶ **3,000.00**

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

28039942587

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. <i>TADDEO FOR CONGRESS</i>		Date of Disbursement
Mailing Address <i>P.O. Box 565388</i>		<input type="text" value="10"/> <input type="text" value="16"/> <input type="text" value="2008"/>
City <i>MIAMI</i>	State <i>FL</i>	Zip Code <i>33256</i>
Purpose of Disbursement <i>CONTRIBUTION</i>	Category/ Type <i>O.I.I.</i>	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name <i>ANNETTE TADDEO</i>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: <i>FL</i>	District: <i>18</i>	

B. <i>DEBBIE HALVORSON FOR CONGRESS</i>		Date of Disbursement
Mailing Address <i>1395 C MAIN STREET</i>		<input type="text" value="10"/> <input type="text" value="16"/> <input type="text" value="2008"/>
City <i>CRETE</i>	State <i>IL</i>	Zip Code <i>60417</i>
Purpose of Disbursement <i>CONTRIBUTION</i>	Category/ Type <i>O.I.I.</i>	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name <i>DEBBIE HALVORSON</i>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: <i>IL</i>	District: <i>11</i>	

C. <i>TILL DERBY FOR CONGRESS</i>		Date of Disbursement
Mailing Address <i>P.O. Box 1901</i>		<input type="text" value="10"/> <input type="text" value="16"/> <input type="text" value="2008"/>
City <i>Minden</i>	State <i>NV</i>	Zip Code <i>89423</i>
Purpose of Disbursement <i>CONTRIBUTION</i>	Category/ Type <i>O.I.I.</i>	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name <i>TILL DERBY</i>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: <i>NV</i>	District: <i>2</i>	

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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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"/> 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)
Feminist Majority PAC

A. DINA Titus for Congress
 Mailing Address: P.O. Box 50614
 City: HENDERSON, NV State: NV Zip Code: 89016
 Purpose of Disbursement: CONTRIBUTION Category/Type: 011
 Candidate Name: DINA Titus
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: NV District: 3
 Date of Disbursement: 10 / 16 / 2008
 Amount of Each Disbursement this Period: 1,000.00

B. KRYZAN FOR CONGRESS
 Mailing Address: 5888 MAIN STREET
 City: WILLIAMSVILLE, NY State: NY Zip Code: 14221
 Purpose of Disbursement: CONTRIBUTION Category/Type: 011
 Candidate Name: ALICE KRYZAN
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: NY District: 26
 Date of Disbursement: 10 / 16 / 2008
 Amount of Each Disbursement this Period: 1,000.00

C. CAMPAIGN TO Elect MARCIA FUDGE
 Mailing Address: 3645 WARRENSVILLE CENTER Rd.
 City: SHAKER HEIGHTS, OH State: OH Zip Code: 44122
 Purpose of Disbursement: CONTRIBUTION Category/Type: 011
 Candidate Name: MARCIA FUDGE
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: OH District: 11
 Date of Disbursement: 10 / 16 / 2008
 Amount of Each Disbursement this Period: 1,000.00

SUBTOTAL of Disbursements This Page (optional)..... 3,000.00
 TOTAL This Period (last page this line number only).....

28039942589

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. <u>KILROY FOR CONGRESS</u>		Date of Disbursement
Mailing Address <u>271 EAST STATE ST.</u>		<input type="checkbox"/> M <input type="checkbox"/> D <input type="checkbox"/> Y <u>10 16 2008</u>
City <u>COLUMBUS, OH</u> State <u>OH</u> Zip Code <u>43215</u>		Amount of Each Disbursement this Period <u>1,000.00</u>
Purpose of Disbursement <u>CONTRIBUTION</u>		
Candidate Name <u>MARY JO KILROY</u>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <u>011</u>
State: <u>OH</u> District: <u>15</u>		

B. <u>KETNER FOR CONGRESS</u>		Date of Disbursement
Mailing Address <u>P.O. Box 277</u>		<input type="checkbox"/> M <input type="checkbox"/> D <input type="checkbox"/> Y <u>10 16 2008</u>
City <u>CHARLESTON, SC</u> State <u>SC</u> Zip Code <u>29402</u>		Amount of Each Disbursement this Period <u>1,000.00</u>
Purpose of Disbursement <u>CONTRIBUTION</u>		
Candidate Name <u>LINDA KETNER</u>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <u>011</u>
State: <u>SC</u> District: <u>1</u>		

C. <u>DARCY BURNER FOR CONGRESS</u>		Date of Disbursement
Mailing Address <u>P.O. Box 1090</u>		<input type="checkbox"/> M <input type="checkbox"/> D <input type="checkbox"/> Y <u>10 16 2008</u>
City <u>CARNATION, WA</u> State <u>WA</u> Zip Code <u>98014</u>		Amount of Each Disbursement this Period <u>1,000.00</u>
Purpose of Disbursement <u>CONTRIBUTION</u>		
Candidate Name <u>DARCY BURNER</u>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <u>011</u>
State: <u>WA</u> District: <u>8</u>		

SUBTOTAL of Disbursements This Page (optional).....▶	<u>3,000.00</u>
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)						PAGE <u>13</u> OF <u>17</u>
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY FOUNDATION

A. **CAROL SHEA-PORTER FOR CONGRESS**
 Full Name (Last, First, Middle Initial)
 Mailing Address: **379 ELM ST.**
 City: **MANCHESTER** State: **NH** Zip Code: **03101**
 Purpose of Disbursement: **CONTRIBUTION** Category/Type: **O.I.I.**
 Candidate Name: **CAROL SHEA-PORTER**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: **NH** District: **1**
 Date of Disbursement: **10/16/2008**
 Amount of Each Disbursement this Period: **1,000.00**

B. **JUDY BAKER FOR CONGRESS**
 Full Name (Last, First, Middle Initial)
 Mailing Address: **201 N. 10TH STREET**
 City: **COLUMBIA, MD** State: **MD** Zip Code: **65201**
 Purpose of Disbursement: **CONTRIBUTION** Category/Type: **O.I.I.**
 Candidate Name: **JUDY BAKER**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: **MD** District: **9**
 Date of Disbursement: **10/21/2008**
 Amount of Each Disbursement this Period: **1,000.00**

C. **KAY BARNES FOR CONGRESS**
 Full Name (Last, First, Middle Initial)
 Mailing Address: **P.O. BOX 14194**
 City: **PARKVILLE** State: **MD** Zip Code: **64152**
 Purpose of Disbursement: **CONTRIBUTION** Category/Type: **O.I.I.**
 Candidate Name: **KAY BARNES**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: District:
 Date of Disbursement: **10/21/2008**
 Amount of Each Disbursement this Period: **1,000.00**

SUBTOTAL of Disbursements This Page (optional)..... **3,000.00**
 TOTAL This Period (last page this line number only).....

28039942591

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. SAM BENNETT for CONGRESS

Date of Disbursement

10 / 21 / 2008

Mailing Address

P.O. Box 9195

City

ALLENTOWN, PA

State

Zip Code

18102

Purpose of Disbursement

CONTRIBUTION

Candidate Name

SAM BENNETT

011

Category/
Type

Amount of Each Disbursement this Period

1,000.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: PA

District: 15

Full Name (Last, First, Middle Initial)

B. WULSIN for CONGRESS

Date of Disbursement

10 / 21 / 2008

Mailing Address

1080 NIMITZVIEW DRIVE

City

CINCINNATI, OH

State

Zip Code

45230

Purpose of Disbursement

CONTRIBUTION

Candidate Name

VICTORIA WULSIN

011

Category/
Type

Amount of Each Disbursement this Period

1,000.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: OH

District: 2

Full Name (Last, First, Middle Initial)

C. BECKY GREENWALD for CONGRESS

Date of Disbursement

10 / 23 / 2008

Mailing Address

144 EAST LAUREL ST.

City

WALKEE

State

Zip Code

IA 50263

Purpose of Disbursement

CONTRIBUTION

Candidate Name

BECKY GREENWALD

011

Category/
Type

Amount of Each Disbursement this Period

1,000.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: IA

District: 4

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

3,000.00

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

3,000.00

28039942592

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. CAROL SHEA-PORTER FOR CONGRESS

Mailing Address

379 ELM STREET

City: MANCHESTER NH State: NH Zip Code: 03101

Purpose of Disbursement

CONTRIBUTION

Candidate Name

CAROL SHEA-PORTER

011

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: NH

District: 1

Date of Disbursement

10 / 23 / 2008

Amount of Each Disbursement this Period

1,000.00

Full Name (Last, First, Middle Initial)

B. KOSMAS FOR CONGRESS

Mailing Address

P.O. BOX 1547

City: NEW SMYRNA BEACH, FL State: FL Zip Code: 32170

Purpose of Disbursement

CONTRIBUTION

Candidate Name

SUZANNE KOSMAS

011

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: FL

District: 24

Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

1,000.00

Full Name (Last, First, Middle Initial)

C. KILROY FOR CONGRESS

Mailing Address

271 EAST STATE STREET

City: COLUMBUS OH State: OH Zip Code: 43215

Purpose of Disbursement

CONTRIBUTION

Candidate Name

MARY JO KILROY

011

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: OH

District: 15

Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

1,000.00

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

3,000.00

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

28039942593

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

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

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 17

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

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NAME OF COMMITTEE (In Full)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. KRYZAN for CONGRESS

Mailing Address

5888 MAIN ST.

City

WILLIAMSVILLE

State NY

Zip Code

14221

Purpose of Disbursement

CONTRIBUTION

Candidate Name

ALICE KRYZAN

011

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: NY

District: 26

Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

1,000.00

Full Name (Last, First, Middle Initial)

B. DINA Titus for CONGRESS

Mailing Address

P.O. Box 50614

City

HENDERSON

State NV

Zip Code

89016

Purpose of Disbursement

CONTRIBUTION

Candidate Name

DINA Titus

011

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: NV

District: 3

Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

1,000.00

Full Name (Last, First, Middle Initial)

C. JUDY BAKER FOR CONGRESS

Mailing Address

201 No. 10th STREET

City

COLUMBIA

State MO

Zip Code

65201

Purpose of Disbursement

CONTRIBUTION

Candidate Name

JUDY BAKER

011

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: MO

District: 09

Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

1,000.00

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

3,000.00

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

28039942594

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

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

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 17

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

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NAME OF COMMITTEE (In Full)

FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial)

A. *MARKEY FOR CONGRESS*

Mailing Address

419 CANYON AVE.

City

FT. COLLINS

State

CO

Zip Code

80521

Purpose of Disbursement

CONTRIBUTION

Candidate Name

BETSY MARKEY

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: *CO*

District: *4*

Date of Disbursement

70 / *09* / *2008*

Amount of Each Disbursement this Period

1000.00

B. *KILROY COUNTS VOTES*

Mailing Address

271 EAST STATE ST.

City

COLUMBUS

State

OH

Zip Code

43215

Purpose of Disbursement

CONTRIBUTION

Candidate Name

MARY JO KILROY

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: *OH*

District: *15*

Date of Disbursement

11 / *12* / *2008*

Amount of Each Disbursement this Period

1000.00

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

2000.00

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

29000.00

28039942595

Federal Election Commission
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