

**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="2011"/> | <input type="text" value="452158.83"/> | <input type="text" value="452158.83"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="1634174.10"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="1469079.49"/> | <input type="text" value="13567732.36"/> |
| (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="3103253.59"/> | <input type="text" value="14019891.19"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="1592987.07"/> | <input type="text" value="12509624.67"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="1510266.52"/> | <input type="text" value="1510266.52"/> |
| 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

FEC Form 3X (Rev. 06/2004)

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)..... | 526950.82 | 4804545.35 |
| (ii) Unitemized | 343642.35 | 4875075.67 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 870593.17 | 9679621.02 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 7500.00 | 81955.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 878093.17 | 9761576.02 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 21415.67 | 486850.22 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 3333.07 | 6495.74 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 566237.58 | 3312810.38 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 566237.58 | 3312810.38 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 1469079.49 | 13567732.36 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 902841.91 | 10254921.98 |

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 | 50264.57 | 383844.04 |
| (ii) Non-Federal Share..... | 50264.71 | 383645.31 |
| (b) Other Federal Operating Expenditures | 1228596.04 | 10654554.02 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 1329125.32 | 11422043.37 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 6979.80 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 126845.50 | 748188.40 |
| 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 | 635.00 | 30609.57 |
| (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))..... | 635.00 | 30609.57 |
| 29. Other Disbursements | 136381.25 | 301803.53 |
| 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)) .. | 1592987.07 | 12509624.67 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 1542722.36 | 12125979.36 |

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) | 878093.17 | 9761576.02 |
| 34. Total Contribution Refunds (from Line 28(d)) | 635.00 | 30609.57 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 877458.17 | 9730966.45 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 1278860.61 | 11038398.06 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 21415.67 | 486850.22 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 1257444.94 | 10551547.84 |

: 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: (check only one) | PAGE 7 OF 2452 |
| | <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. Arlene Abady | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 765 Carr Street | | Transaction ID : 3128993 |
| City Lakewood | State CO | Zip Code 80214 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 20.00 |
| 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 ▼ 240.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Donna Abbaticchio | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 13 / 2011 |
| Mailing Address 1317 First Avenue #3D | | Transaction ID : 3126749 |
| City NY | State NY | Zip Code 10021 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer n/a | 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) C. Ms. Toni Abbey | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 16696 White Haven Drive | | Transaction ID : 3127190 |
| City Northville | State MI | Zip Code 48168 |
| 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 ▼ 1000.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1520.00 |
| 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 8 OF 2452 |
| | <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 E E. Abbingsole | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 2410 Edwards Street | | Transaction ID : 3128991 |
| City Berkeley | State CA | Zip Code 94702 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 20.00 |
| Name of Employer Global 360, Inc. | Occupation Technical Writer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Suzanne Aberly | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 3510 Turtle Creek Blvd Apt 6D | | Transaction ID : 3128045 |
| City Dallas | State TX | Zip Code 75219 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 1000.00 |
| Name of Employer P.R. Projects Inc. | Occupation Publicist | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1052.50 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Luann Wilkins Abrahams | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 45 Walnut St | | Transaction ID : 3129034 |
| City Somerville | State MA | Zip Code 02143 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 30.00 |
| Name of Employer Abco | Occupation Buisness Manager | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 305.00 | |

| | |
|--|---------|
| 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 9 OF 2452 |
| | <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. Mrs. Elena P P. Abrahams
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 North Street
 City State Zip Code
 Old Greenwich CT 06870
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Greenwich, CT Board of Education Substitute Teacher/Tutor
 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
 12 / 15 / 2011
Transaction ID : 3128876
 Amount of Each Receipt this Period
 25.00

B. Dee Abrahamse
 Full Name (Last, First, Middle Initial)
 Mailing Address 7085 Aivlis Street
 City State Zip Code
 Long Beach CA 90815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CAI State University, Long Beach (form 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
 12 / 10 / 2011
Transaction ID : 3126021
 Amount of Each Receipt this Period
 100.00

C. Ms. Nina Dodge Abrams
 Full Name (Last, First, Middle Initial)
 Mailing Address 12959 Talbot Lane
 City State Zip Code
 Huntington Woods MI 48070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Abrams Law firm ATTORNEY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131477
 Amount of Each Receipt this Period
 1000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1125.00 |
| 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 10 OF 2452 |
| | <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. Victoria B. Abrams
 Full Name (Last, First, Middle Initial)
 Mailing Address 17 Tanglewood Drive
 City State Zip Code
 Concord MA 01742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-employed Healthcare Managemen
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129454
 Amount of Each Receipt this Period
 50.00

B. Dr. Dawn Abriel
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 Dutch Rd
 City State Zip Code
 Santa Fe NM 87508
 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 ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3122790
 Amount of Each Receipt this Period
 20.00

C. Ms. Lois Adam
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 Pinoak Drive
 City State Zip Code
 Egg Harbor Township NJ 08234
 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 ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128654
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 11 OF 2452
(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 A. Adams
 Full Name (Last, First, Middle Initial)
 Mailing Address 2512 Alonda Ln NE
 City Olympia State WA Zip Code 98516
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3123972
 Amount of Each Receipt this Period
 50.00

B. Ms. Nancy A. Adams
 Full Name (Last, First, Middle Initial)
 Mailing Address 14518 Shaker Blvd.
 City Cleveland State OH Zip Code 44120
 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 ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3122079
 Amount of Each Receipt this Period
 250.00

C. Ms. Deanne L. Adams
 Full Name (Last, First, Middle Initial)
 Mailing Address 1348 Glen Drive
 City San Leandro State CA Zip Code 94577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US National Park Service Occupation Park Ranger
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128497
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 320.00
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 2452 |
| | <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. Lynda G. Adamson
Full Name (Last, First, Middle Initial)

Mailing Address 2717 N Fillmore St

City Arlington State VA Zip Code 22207

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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129157

Amount of Each Receipt this Period
 20.00

B. Ms. Betty M. Adelson
Full Name (Last, First, Middle Initial)

Mailing Address 439 Sixth Street

City Brooklyn State NY Zip Code 11215

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

Name of Employer none Occupation Retired psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011

Transaction ID : 3124040

Amount of Each Receipt this Period
 25.00

C. Ms. Betty M. Adelson
Full Name (Last, First, Middle Initial)

Mailing Address 439 Sixth Street

City Brooklyn State NY Zip Code 11215

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

Name of Employer none Occupation Retired psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011

Transaction ID : 3127280

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 2452 |
| | <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. Naava Ades
Full Name (Last, First, Middle Initial)
Mailing Address 50 W. 97th St., #12K

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10025 |
|------------------|-------------|-------------------|

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 |
| 12 | / | 06 | / | 2011 |

Transaction ID : 3122913

Amount of Each Receipt this Period
200.00

B. Dr. Philip Adler
Full Name (Last, First, Middle Initial)
Mailing Address 3507 Bayshore Blvd., Unit 1001

| | | |
|---------------|-------------|-------------------|
| City Tampa | State FL | Zip Code 33629 |
|---------------|-------------|-------------------|

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 ▼
260.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 28 | / | 2011 |

Transaction ID : 3135202

Amount of Each Receipt this Period
125.00

C. Ms. Jackie Afram
Full Name (Last, First, Middle Initial)
Mailing Address 1617 N Quincy St

| | | |
|-------------------|-------------|-------------------|
| City Arlington | State VA | Zip Code 22207 |
|-------------------|-------------|-------------------|

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

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 13 | / | 2011 |

Transaction ID : 3126417

Amount of Each Receipt this Period
300.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 445.00 |
| 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 2452 |
| | (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. Ellen Afromsky
Full Name (Last, First, Middle Initial)
Mailing Address 1619 Third Avenue #7H
City New York State NY Zip Code 10128
FEC ID number of contributing federal political committee. **C**
Name of Employer SMART Technologies Occupation Sales
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 670.00

Date of Receipt 12 / 02 / 2011
Transaction ID : 3120025
Amount of Each Receipt this Period 25.00

B. Ms. Ellen Afromsky
Full Name (Last, First, Middle Initial)
Mailing Address 1619 Third Avenue #7H
City New York State NY Zip Code 10128
FEC ID number of contributing federal political committee. **C**
Name of Employer SMART Technologies Occupation Sales
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 670.00

Date of Receipt 12 / 22 / 2011
Transaction ID : 3134322
Amount of Each Receipt this Period 35.00

C. Ms. Linda L Agerter
Full Name (Last, First, Middle Initial)
Mailing Address 51 Parkside Drive
City Berkeley State CA Zip Code 94705
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 ▼ 600.00

Date of Receipt 12 / 20 / 2011
Transaction ID : 3132582
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional).....▶ 310.00
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 15 OF 2452 |
| | <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. Lawrence G. Agron | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 57 West Drive | | Transaction ID : 3132119 |
| City Livingston | State NJ | Zip Code 07039 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 250.00 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Aggregate Year-to-Date ▼ 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Alex-Handrah Aime | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 18 / 2011 |
| Mailing Address 4589 Kings Highway | | Transaction ID : 3131136 |
| City Brooklyn | State NY | Zip Code 11234 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500.00 | |
| Name of Employer Emerging Capital Partners | Occupation Finance | Aggregate Year-to-Date ▼ 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Lamees Al Ayoubi | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 18 / 2011 |
| Mailing Address 4701 Willard Ave Apt .618 | | Transaction ID : 3131209 |
| City Chevy Chase | State WA | Zip Code 20815 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 15.00 | |
| Name of Employer DCPS | Occupation Retired Teacher | Aggregate Year-to-Date ▼ 206.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 765.00 |
| 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 16 OF 2452 |
| | <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. Jean S. Albert
 Full Name (Last, First, Middle Initial)
 Mailing Address 250 W, 15th St. #2F
 City New York State NY Zip Code 10011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer URS Corporation Occupation Marketing manager
 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
 12 / 21 / 2011
Transaction ID : 3133944
 Amount of Each Receipt this Period
250.00

B. Ms. Mary E. Allan
 Full Name (Last, First, Middle Initial)
 Mailing Address 24146 W Greystone Lane
 City Woodway State WA Zip Code 98020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Executive Coach
 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
 12 / 15 / 2011
Transaction ID : 3129453
 Amount of Each Receipt this Period
25.00

C. Dr. Patricia J. Almond
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 899
 City Mulino State OR Zip Code 97042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Employed Occupation Education Consultant
 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
 12 / 16 / 2011
Transaction ID : 3131065
 Amount of Each Receipt this Period
100.00

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 375.00 |
| 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 17 OF 2452 |
| | <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. jill alper | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2011 Transaction ID : 3119172 |
| Mailing Address 363 st. clair | | Amount of Each Receipt this Period 500.00 |
| City grosse pointe | State MI | Zip Code 48230 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Dewey Square Group | Occupation Partner | |
| 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. Ms. Susan Alpert | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2011 Transaction ID : 3122807 |
| Mailing Address 200 Park Avenue Unit 403 | | Amount of Each Receipt this Period 25.00 |
| City Minneapolis | State MN | Zip Code 55415 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self | Occupation Consultant | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 825.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Susan Alpert | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2011 Transaction ID : 3127282 |
| Mailing Address 200 Park Avenue Unit 403 | | Amount of Each Receipt this Period 250.00 |
| City Minneapolis | State MN | Zip Code 55415 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self | Occupation Consultant | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 825.00 | |

| | |
|--|--------|
| 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 18 OF 2452 |
| | <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. Karen B. Alschuler | | Date of Receipt |
| Mailing Address 50 Delano Ave | | <input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2011"/> |
| City State Zip Code San Francisco CA 94112 | | Transaction ID : 3129973 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period <input type="text" value="150.00"/> |
| Name of Employer perkins+will | Occupation Urban Planner | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="350.00"/> | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Ms. Julane B. Alt | | Date of Receipt |
| Mailing Address 1227 W golf road | | <input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2011"/> |
| City State Zip Code Libertyville IL 60048 | | Transaction ID : 3124851 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period <input type="text" value="50.00"/> |
| Name of Employer Fannie Mae | Occupation Attorney | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="650.00"/> | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Ms. Janet Kyle Kyle Altman | | Date of Receipt |
| Mailing Address 5935 SW 76th Street | | <input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2011"/> |
| City State Zip Code South Miami FL 33143 | | Transaction ID : 3120297 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period <input type="text" value="25.00"/> |
| Name of Employer Kaufman, Rossin & Co. | Occupation Marketing | |
| 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"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="225.00"/> |
| 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 19 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Jean L. Ambrose
 Full Name (Last, First, Middle Initial)
 Mailing Address 7305 Westover Way
 City Somerset State NJ Zip Code 08873
 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 ▼ 1670.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119362
 Amount of Each Receipt this Period
 100.00

B. Ms. Jean L. Ambrose
 Full Name (Last, First, Middle Initial)
 Mailing Address 7305 Westover Way
 City Somerset State NJ Zip Code 08873
 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 ▼ 1670.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2011
Transaction ID : 3119856
 Amount of Each Receipt this Period
 100.00

C. Ms. Jean L. Ambrose
 Full Name (Last, First, Middle Initial)
 Mailing Address 7305 Westover Way
 City Somerset State NJ Zip Code 08873
 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 ▼ 1670.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128060
 Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 300.00 |
| 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 20 OF 2452
(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. Richard F. Ames
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Orchard Drive
 City State Zip Code
 Scotch Plains NJ 07076
 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 ▼
 555.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126277
 Amount of Each Receipt this Period
 100.00

B. Mr. Richard F. Ames
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Orchard Drive
 City State Zip Code
 Scotch Plains NJ 07076
 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 ▼
 555.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129305
 Amount of Each Receipt this Period
 21.00

C. Margaret Amsden
 Full Name (Last, First, Middle Initial)
 Mailing Address 4744 Haddington Dr.
 City State Zip Code
 Bloomfield Hills MI 48304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Clayton & McKervey, P.C. Accountant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3122922
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 141.00
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 21 OF 2452 |
| | <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. Kathryn M. Anastos M.D. | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 25 / 2011 |
| Mailing Address 41 Lewis Parkway 41 Lewis Parkway | | Transaction ID : 3135380 |
| City Yonkers | State NY | Zip Code 10705 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100.00 | |
| Name of Employer Montefiore Medical Center | Occupation Physician | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1200.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Dr. Barbara G Andersen | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2011 |
| Mailing Address 7 Macbeth Ct. | | Transaction ID : 3119113 |
| City Rancho Mirage | State CA | Zip Code 92270 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 250.00 | |
| Name of Employer Self-Employed | Occupation Physician | |
| 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. Judy K. Anderson | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 1370 W Grand Avenue, # 125 | | Transaction ID : 3129426 |
| City Grover Beach | State CA | Zip Code 93433 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 15.00 | |
| Name of Employer n/a | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 205.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 365.00 |
| 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 22 OF 2452 |
| | <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. Joan Anderson
Full Name (Last, First, Middle Initial)
Mailing Address 2826 W B St
City Torrington State WY Zip Code 82240
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 ▼ 490.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3128564
Amount of Each Receipt this Period 50.00

B. Mr. Clifford Anderson
Full Name (Last, First, Middle Initial)
Mailing Address 1408 La Sierra Dr.
City Sacramento State CA Zip Code 95864
FEC ID number of contributing federal political committee. **C**
Name of Employer CSU Sacramento Occupation Teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 367.50

Date of Receipt 12 / 16 / 2011
Transaction ID : 3131555
Amount of Each Receipt this Period 80.00

C. Ms. Joan Anderson
Full Name (Last, First, Middle Initial)
Mailing Address 3424 Monitor Lane
City Tallahassee State FL Zip Code 32312
FEC ID number of contributing federal political committee. **C**
Name of Employer Humphrey Anderson Law Firm Occupation Atty
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 12 / 2011
Transaction ID : 3126108
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.00
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 23 OF 2452 |
| | <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 S. Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 38 7th Ave., Apt. 2 #2
 City Brooklyn State NY Zip Code 11217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation Writer
 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
 12 / 20 / 2011
Transaction ID : 3133393
 Amount of Each Receipt this Period
125.00

B. 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 Peoples Group, Inc. self-employed Occupation asset manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132306
 Amount of Each Receipt this Period
500.00

C. Mr. Brian K. Annis
 Full Name (Last, First, Middle Initial)
 Mailing Address 869A West Outer Dr
 City Oak Ridge State TN Zip Code 37830
 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 **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011
Transaction ID : 3120095
 Amount of Each Receipt this Period
250.00

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: (check only one) | PAGE 24 OF 2452 |
| | <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 Ansay
Full Name (Last, First, Middle Initial)

Mailing Address 3121 Timber Ln.

City Verona State WI Zip Code 53593

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 ▼ **275.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011

Transaction ID : 3134144

Amount of Each Receipt this Period
50.00

B. Ms. Jacqueline Appel
Full Name (Last, First, Middle Initial)

Mailing Address 2908 Arnold Street

City Bakersfield State CA Zip Code 93305

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 ▼ **265.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129024

Amount of Each Receipt this Period
15.00

C. Ms. Rima D. Apple
Full Name (Last, First, Middle Initial)

Mailing Address 2013 Madison St.

City Madison State WI Zip Code 53711

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

Name of Employer University of Wisconsin Occupation Professor

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
 12 / 27 / 2011

Transaction ID : 3134445

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **190.00**

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 25 OF 2452 |
| | <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. Kimberly Applegate
 Full Name (Last, First, Middle Initial)
 Mailing Address 640 Morningside Ct
 City Zionsville State IN Zip Code 46077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Clarian Occupation Radiologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3137461
 Amount of Each Receipt this Period
 400.00

B. Mr. E. James Archer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1137 Vanderbilt Way
 City Sacramento State CA Zip Code 95825
 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 ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 24 / 2011
Transaction ID : 3135381
 Amount of Each Receipt this Period
 10.00

C. Ms. Beth Arman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1721 Arlington Avenue
 City Halethorpe State MD Zip Code 21227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Community College of Baltimore County Occupation community college ad
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119379
 Amount of Each Receipt this Period
 250.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 300.00 |
| 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 26 OF 2452 |
| | <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. Beth Arman
Full Name (Last, First, Middle Initial)
Mailing Address 1721 Arlington Avenue

| | | |
|--------------------|-------------|-------------------|
| City Halethorpe | State MD | Zip Code 21227 |
|--------------------|-------------|-------------------|

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

| | |
|---|------------------------------------|
| Name of Employer Community College of Baltimore County | Occupation community college ad |
|---|------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **370.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128797

Amount of Each Receipt this Period

| |
|-------|
| 10.00 |
|-------|

B. Mrs. Suzanne Armentrout
Full Name (Last, First, Middle Initial)
Mailing Address 2333 W 13th Street

| | | |
|--------------------|-------------|-------------------|
| City The Dalles | State OR | Zip Code 97058 |
|--------------------|-------------|-------------------|

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 |
| 12 | / | 11 | / | 2011 |

Transaction ID : 3125806

Amount of Each Receipt this Period

| |
|-------|
| 25.00 |
|-------|

C. Mr. Carl Armstrong
Full Name (Last, First, Middle Initial)
Mailing Address 2415 W. Tucana Street

| | | |
|----------------|-------------|-------------------|
| City Tucson | State AZ | Zip Code 85745 |
|----------------|-------------|-------------------|

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 ▼ **240.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129436

Amount of Each Receipt this Period

| |
|-------|
| 20.00 |
|-------|

| | |
|--|--------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 55.00 |
| 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 27 OF 2452 |
| | (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. Charlotte S. Arnold
Full Name (Last, First, Middle Initial)
Mailing Address 3701 Northwind Ct.
City Jupiter State FL Zip Code 33477
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 ▼ 436.25

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 19 / 2011
Transaction ID : 3132006
Amount of Each Receipt this Period
80.00

B. Ms. Joan Arnold
Full Name (Last, First, Middle Initial)
Mailing Address 4918 E. Cooper Street
City Tucson State AZ Zip Code 85711
FEC ID number of contributing federal political committee. **C**
Name of Employer Pima Community College 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
12 / 18 / 2011
Transaction ID : 3130972
Amount of Each Receipt this Period
50.00

C. C. Arnold
Full Name (Last, First, Middle Initial)
Mailing Address 15 Glenn Ct
City Decatur State GA Zip Code 30030
FEC ID number of contributing federal political committee. **C**
Name of Employer Self 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
12 / 08 / 2011
Transaction ID : 3124058
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 380.00
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 2452 |
| | <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. Rose Aronin
Full Name (Last, First, Middle Initial)
Mailing Address 5113 Cantabria Crst
City Sarasota State FL Zip Code 34238
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 ▼ 262.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129332
Amount of Each Receipt this Period
21.00

B. Mrs. R J Arrowsmith
Full Name (Last, First, Middle Initial)
Mailing Address 1585 Foxham Dr.
City Chesterfield State MO Zip Code 63017
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 ▼ 500.00

Date of Receipt
12 / 14 / 2011
Transaction ID : 3127289
Amount of Each Receipt this Period
250.00

C. Ms. Sheila Ary
Full Name (Last, First, Middle Initial)
Mailing Address 526 Russell Road
City DeKalb State IL Zip Code 60115
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 ▼ 1085.00

Date of Receipt
12 / 14 / 2011
Transaction ID : 3127291
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 371.00
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 2452 |
| | <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. Sheila Ary
Full Name (Last, First, Middle Initial)
Mailing Address 526 Russell Road
City DeKalb State IL Zip Code 60115
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 ▼ 1085.00

Date of Receipt
12 / 24 / 2011
Transaction ID : 3135383
Amount of Each Receipt this Period
40.00

B. Ms. Claire Ashkin
Full Name (Last, First, Middle Initial)
Mailing Address 1200 Riverside Dr., Unit 1281 Unit 1281
City Reno State NV Zip Code 89503
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 ▼ 230.00

Date of Receipt
12 / 16 / 2011
Transaction ID : 3131622
Amount of Each Receipt this Period
30.00

C. Lewis Ashman
Full Name (Last, First, Middle Initial)
Mailing Address 3227 Mirimar Street
City Dayton State OH Zip Code 45409
FEC ID number of contributing federal political committee. **C**
Name of Employer Kettering School System Occupation teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
12 / 14 / 2011
Transaction ID : 3127292
Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
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 30 OF 2452 |
| | <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. Josephine Ashworth
Full Name (Last, First, Middle Initial)
Mailing Address 21 Reynolds Rd.
City Troy State NY Zip Code 12180
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 ▼ 400.00

Date of Receipt 12 / 29 / 2011
Transaction ID : 3137756
Amount of Each Receipt this Period 150.00

B. Mr. Russell Atkinson
Full Name (Last, First, Middle Initial)
Mailing Address 3223 Redwood Drive
City Aptos State CA Zip Code 95003
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 ▼ 220.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129133
Amount of Each Receipt this Period 20.00

C. Bob Atwood
Full Name (Last, First, Middle Initial)
Mailing Address 248 Boulder Cr Dr#8
City Redding State CA Zip Code 96003
FEC ID number of contributing federal political committee. **C**
Name of Employer Walmart Occupation maintenance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 12 / 01 / 2011
Transaction ID : 3119174
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00
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 31 OF 2452 |
| | <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. Bob Atwood
 Full Name (Last, First, Middle Initial)
 Mailing Address 248 Boulder Cr Dr#8
 City Redding State CA Zip Code 96003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Walmart Occupation maintenance
 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
 12 / 14 / 2011
Transaction ID : 3127293
 Amount of Each Receipt this Period
 35.00

B. Bob Atwood
 Full Name (Last, First, Middle Initial)
 Mailing Address 248 Boulder Cr Dr#8
 City Redding State CA Zip Code 96003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Walmart Occupation maintenance
 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
 12 / 28 / 2011
Transaction ID : 3136043
 Amount of Each Receipt this Period
 50.00

c. Mr. Craig L Auster
 Full Name (Last, First, Middle Initial)
 Mailing Address 70 I Street SE Apt. 803
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer USAction Occupation Development & Politi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 401.34

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119407
 Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 185.00 |
| 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 32 OF 2452
(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. Craig L Auster
 Mailing Address 70 I Street SE Apt. 803
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 USAction Development & Politi
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 401.34

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131083
 Amount of Each Receipt this Period
 83.00

Full Name (Last, First, Middle Initial)
B. Ms. Mary K Austin
 Mailing Address 1221 Malvern Ave.
 City Pittsburgh State PA Zip Code 15217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 UPMC Attorney
 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
 12 / 22 / 2011
Transaction ID : 3134064
 Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
C. Dr. Wkirk Kirk Avery
 Mailing Address PO Box 411
 City Bridgewater State MA Zip Code 02324
 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 ▼
 635.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131961
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 373.00
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 33 OF 2452 |
| | <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. Jane A. Axelrad
Full Name (Last, First, Middle Initial)
Mailing Address 4417 Ridge St
City Chevy Chase State MD Zip Code 20815
FEC ID number of contributing federal political committee. **C**
Name of Employer Federal Gov Occupation Attorney
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **12 / 15 / 2011**
Transaction ID : 3129094
Amount of Each Receipt this Period **250.00**

B. Ms. Evelyne A Axelrod
Full Name (Last, First, Middle Initial)
Mailing Address 17 Dublin Road
City Pennington State NJ Zip Code 08534
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 **425.00**

Date of Receipt **12 / 13 / 2011**
Transaction ID : 3126993
Amount of Each Receipt this Period **100.00**

C. Mr. Paul R. Axelrod
Full Name (Last, First, Middle Initial)
Mailing Address 9200 Ferncliff Ave, NE
City Bainbridge Island State WA Zip Code 98110
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-employed Occupation Consultant
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **480.00**

Date of Receipt **12 / 15 / 2011**
Transaction ID : 3129317
Amount of Each Receipt this Period **40.00**

SUBTOTAL of Receipts This Page (optional)..... **165.00**
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 34 OF 2452 |
| | <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. Jerald G. Bachman
Full Name (Last, First, Middle Initial)
Mailing Address 7816 Stonehedge Valley Drive

| | | |
|-----------------|-------------|-------------------|
| City Gregory | State MI | Zip Code 48137 |
|-----------------|-------------|-------------------|

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

| | |
|--|----------------------------------|
| Name of Employer University of Michigan | Occupation Research Professor |
|--|----------------------------------|

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 |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3130891

Amount of Each Receipt this Period
500.00

B. Ms. Mary Louise Backus Rankin
Full Name (Last, First, Middle Initial)
Mailing Address 1614 44th Street NW

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20007 |
|--------------------|-------------|-------------------|

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

| | |
|--------------------------|-------------------------|
| Name of Employer Self | Occupation Historian |
|--------------------------|-------------------------|

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 |
| 12 | / | 05 | / | 2011 |

Transaction ID : 3121601

Amount of Each Receipt this Period
500.00

C. Ms. Laura J. Baden
Full Name (Last, First, Middle Initial)
Mailing Address 1120 Fern Street

| | | |
|-----------------|-------------|-------------------|
| City Ashland | State OR | Zip Code 97520 |
|-----------------|-------------|-------------------|

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

| | |
|------------------------------|-------------------------------------|
| Name of Employer SOU/OLLI | Occupation instructor, volunteer |
|------------------------------|-------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 12 | / | 2011 |

Transaction ID : 3126109

Amount of Each Receipt this Period
85.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1085.00 |
| 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 35 OF 2452 |
| | <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 Badenoch
Full Name (Last, First, Middle Initial)
Mailing Address 13108 SE Forest Street
City Vancouver State WA Zip Code 98683
FEC ID number of contributing federal political committee. **C**
Name of Employer Center for Brain-Wise Living Occupation Author
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **360.00**

Date of Receipt **12 / 17 / 2011**
Transaction ID : 3129987
Amount of Each Receipt this Period **30.00**

B. Mrs. Suzanne Bailey
Full Name (Last, First, Middle Initial)
Mailing Address 9 Sunrise Avenue
City Ormond Beach State FL Zip Code 32176
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 **220.00**

Date of Receipt **12 / 22 / 2011**
Transaction ID : 3134261
Amount of Each Receipt this Period **20.00**

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 n/a Occupation retired
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1325.00**

Date of Receipt **12 / 16 / 2011**
Transaction ID : 3131000
Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **150.00**
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 2452 |
| | <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. Margaret Baker | | Date of Receipt |
| Mailing Address 1200 Remington Rd | | <input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Wynnewood | PA | 19096 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3121801 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| REQUESTED | REQUESTED | <input type="text" value="120.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="258.80"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Nancy L. Baker | | Date of Receipt |
| Mailing Address 30 Alder CT | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Iowa City | IA | 52246 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3134436 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| Wash State University | Librarian | <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. Jerry Balash | | Date of Receipt |
| Mailing Address 4356 Center Pointe Lane | | <input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Sarasota | FL | 34233 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3129993 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| n/a | retired | <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="2560.00"/> | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="2870.00"/> |
| 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 37 OF 2452 |
| | <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. Carol Ball
Full Name (Last, First, Middle Initial)
Mailing Address 4645 Lambert Dr
City Alexandria State VA Zip Code 22311
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 **275.00**

Date of Receipt
12 / 20 / 2011
Transaction ID : 3133244
Amount of Each Receipt this Period
100.00

B. Mrs. Ora Band
Full Name (Last, First, Middle Initial)
Mailing Address 333 South La Peer Drive
City Beverly Hills State CA Zip Code 90211
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 **592.50**

Date of Receipt
12 / 05 / 2011
Transaction ID : 3121103
Amount of Each Receipt this Period
180.00

C. Ms. Katrice Banks
Full Name (Last, First, Middle Initial)
Mailing Address 3115 Russell Rd
City Alexandria State VA Zip Code 22305
FEC ID number of contributing federal political committee. **C**
Name of Employer AT&T Occupation Asst Vice President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1000.00**

Date of Receipt
12 / 13 / 2011
Transaction ID : 3126826
Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... **1280.00**
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 38 OF 2452 |
| | (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

Full Name (Last, First, Middle Initial)
A. Mr. Ralph Barbee

Mailing Address 16309 Orchard Bend Road

| | | |
|---------------|-------------|-------------------|
| City Poway | State CA | Zip Code 92064 |
|---------------|-------------|-------------------|

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

| | |
|-----------------------------------|-----------------------------------|
| Name of Employer Self-employed | Occupation Software Consultant |
|-----------------------------------|-----------------------------------|

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129448

Amount of Each Receipt this Period

| |
|--------|
| 250.00 |
|--------|

Full Name (Last, First, Middle Initial)
B. Ms. Frances L. Bard

Mailing Address 232 Hartnell Pl.

| | | |
|--------------------|-------------|-------------------|
| City Sacramento | State CA | Zip Code 95825 |
|--------------------|-------------|-------------------|

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 ▼
255.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 19 | / | 2011 |

Transaction ID : 3131887

Amount of Each Receipt this Period

| |
|-------|
| 80.00 |
|-------|

Full Name (Last, First, Middle Initial)
C. Ms. Kathryn Bardwell

Mailing Address 562 Canyon Point Rd.

| | | |
|--------------------|-------------|-------------------|
| City Las Cruces | State NM | Zip Code 88011 |
|--------------------|-------------|-------------------|

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 ▼
275.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3134406

Amount of Each Receipt this Period

| |
|-------|
| 75.00 |
|-------|

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 185.00 |
| 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 2452 |
| | <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. Shauna Barkley
Full Name (Last, First, Middle Initial)

Mailing Address 4240 E. Clarendon Ave

City Phoenix State AZ Zip Code 85018

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

Name of Employer Honeywell Occupation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt 12 / 18 / 2011
Transaction ID : 3130952

Amount of Each Receipt this Period 31.00

B. Sibylle J. Barlow
Full Name (Last, First, Middle Initial)

Mailing Address 241 Holden Wood Rd

City Concord State MA Zip Code 01742

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

Name of Employer none Occupation retired secretary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt 12 / 17 / 2011
Transaction ID : 3129997

Amount of Each Receipt this Period 50.00

C. Ms. Kathryn E. Barnard
Full Name (Last, First, Middle Initial)

Mailing Address 11508 Durland Avenue NE

City Seattle State WA Zip Code 98125

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

Name of Employer Univ. of Washington Occupation Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3128603

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 131.00

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 2452 |
| | <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. John D. Barnes
Full Name (Last, First, Middle Initial)
Mailing Address 7710 Chatham Rd

| | | |
|---|-------------------------------------|-------------------|
| City Chevy Chase | State MD | Zip Code 20815 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 4950.00 | |

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 19 / 2011
Transaction ID : 3132458

Amount of Each Receipt this Period
1000.00

B. Donna Barnes-Haesemeyer
Full Name (Last, First, Middle Initial)
Mailing Address 526 W. Lake Dr.

| | | |
|---|------------------------------------|-------------------|
| City Shell Lake | State WI | Zip Code 54871 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer city of Shell Lake | Occupation alderperson | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | |

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 13 / 2011
Transaction ID : 3126361

Amount of Each Receipt this Period
100.00

C. Ms. Sandra S Baron
Full Name (Last, First, Middle Initial)
Mailing Address 20 W. 64th

| | | |
|---|-------------------------------------|-------------------|
| City New York | State NY | Zip Code 10023 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Media Law Resource Center | Occupation Attorney | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2500.00 | |

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 19 / 2011
Transaction ID : 3132309

Amount of Each Receipt this Period
2500.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3600.00 |
| 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 41 OF 2452 |
| | <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. Diane A. Barrentine
 Full Name (Last, First, Middle Initial)
 Mailing Address 93 CR 150
 City Coila State MS Zip Code 38923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation Restaurant Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2011
Transaction ID : 3125864
 Amount of Each Receipt this Period
 10.00

B. Ms. Kristen L. Barrett
 Full Name (Last, First, Middle Initial)
 Mailing Address 4158 NW 90TH Avenue, # 102
 City Coral Springs State FL Zip Code 33065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kids In Distress, Inc. Occupation Fundraiser
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129419
 Amount of Each Receipt this Period
 17.00

C. Ms. Katie Barrett Wiik
 Full Name (Last, First, Middle Initial)
 Mailing Address 5658 Birch Trail
 City Shoreview State MN Zip Code 55126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Robins, Kaplan, Miller & Ciresi, LLP Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129644
 Amount of Each Receipt this Period
 20.00

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 47.00 |
| 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 42 OF 2452 |
| | <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. Hathaway Barry | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address PO Box 157 | | | Transaction ID : 3134702 |
| City Port Reyes Station | State CA | Zip Code 94956 | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Self | Occupation Mediator | | |
| 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. Janet Barsy | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 25 / 2011 |
| Mailing Address 3302 21st Avenue North | | | Transaction ID : 3135387 |
| City Arlington | State VA | Zip Code 22207 | Amount of Each Receipt this Period 100.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer U.S. Department of Energy | Occupation lawyer | | |
| 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) C. Ms. Nora Barth | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 18 / 2011 |
| Mailing Address 7285 County Road 72 | | | Transaction ID : 3131297 |
| City Windsor | State CO | Zip Code 80550 | Amount of Each Receipt this Period 50.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer n/a | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 495.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1150.00 |
| 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 43 OF 2452 |
| | <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. Nora Barth
Full Name (Last, First, Middle Initial)
Mailing Address 7285 County Road 72

| | | |
|-----------------|-------------|-------------------|
| City Windsor | State CO | Zip Code 80550 |
|-----------------|-------------|-------------------|

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 ▼
100.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2011 |

Transaction ID : 3132605

Amount of Each Receipt this Period

| |
|--------|
| 100.00 |
|--------|

B. Ms. Suzanne S. Bartolucci
Full Name (Last, First, Middle Initial)
Mailing Address 3131 Turtle Creek, Suite 208

| | | |
|----------------|-------------|-------------------|
| City Dallas | State TX | Zip Code 75219 |
|----------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 09 | / | 2011 |

Transaction ID : 3125084

Amount of Each Receipt this Period

| |
|---------|
| 1000.00 |
|---------|

C. Cynthia Barton
Full Name (Last, First, Middle Initial)
Mailing Address 536 Weston Drive

| | | |
|------------------|-------------|-------------------|
| City Campbell | State CA | Zip Code 95008 |
|------------------|-------------|-------------------|

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

| | |
|---|------------------------------------|
| Name of Employer McClatchy Interactive | Occupation National Online Ad T |
|---|------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 14 | / | 2011 |

Transaction ID : 3127303

Amount of Each Receipt this Period

| |
|-------|
| 75.00 |
|-------|

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1175.00 |
| 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 44 OF 2452 |
| | <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. DR. S. Barton
Full Name (Last, First, Middle Initial)

Mailing Address 3421 SE 24TH TER

City Topeka State KS Zip Code 66605

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

Name of Employer Washburn University Occupation Professor Emeritus

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
 12 / 20 / 2011

Transaction ID : 3133143

Amount of Each Receipt this Period
 100.00

B. Ms. Rena Hecht Basch
Full Name (Last, First, Middle Initial)

Mailing Address 4260 Shetland Drive

City Ann Arbor State MI Zip Code 48105

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

Name of Employer Self Occupation Business Owner

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
 12 / 25 / 2011

Transaction ID : 3135608

Amount of Each Receipt this Period
 100.00

C. Ms. Lucia Bastasch
Full Name (Last, First, Middle Initial)

Mailing Address 6506 SE 21st Ave.

City Portland State OR Zip Code 97202

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 ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011

Transaction ID : 3131632

Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00

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 2452 |
| | <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. Margaret Batko | | Date of Receipt |
| Mailing Address 1107 N. Chambliss Street | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City Alexandria | State VA | Zip Code 22312 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3129579 |
| Name of Employer USDA | | Amount of Each Receipt this Period |
| Occupation government analyst | | <input type="text" value="100.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| <input type="text" value="990.00"/> | | |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Donna Bauerly | | Date of Receipt |
| Mailing Address 305 River Ridge St | | <input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2011"/> |
| City Dubuque | State IA | Zip Code 52003 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3125269 |
| Name of Employer n/a | | Amount of Each Receipt this Period |
| Occupation Retired | | <input type="text" value="70.12"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| <input type="text" value="282.12"/> | | |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mr. Stephen R R. Baum | | Date of Receipt |
| Mailing Address 111 Newell Avenue | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City Neeham | State MA | Zip Code 02492 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3128974 |
| Name of Employer Kurzweil Educational Systems | | Amount of Each Receipt this Period |
| Occupation Software Engineer | | <input type="text" value="25.00"/> |
| 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"/> | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="195.12"/> |
| 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 46 OF 2452 |
| | <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. Carolyn Baum
Full Name (Last, First, Middle Initial)

Mailing Address 6314 S. Rosebury Avenue Apt. 3
Apt. 3W

City Saint Louis State MO Zip Code 63105

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

Name of Employer WA University School Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129025

Amount of Each Receipt this Period
25.00

B. Ms. Helen M. Beall
Full Name (Last, First, Middle Initial)

Mailing Address 1255 Mt. Ida Road

City Oroville State CA Zip Code 95966

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 ▼ 377.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3121591

Amount of Each Receipt this Period
50.00

C. Ms. Helen M. Beall
Full Name (Last, First, Middle Initial)

Mailing Address 1255 Mt. Ida Road

City Oroville State CA Zip Code 95966

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 ▼ 377.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3128579

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00

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

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 47 OF 2452 |
| | (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. Peg Bean | | Date of Receipt |
| Mailing Address 812 Lexington Cross Drive | | <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Las Vegas | NV | 89144 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3139170 |
| Name of Employer REQUESTED | | Amount of Each Receipt this Period |
| Occupation REQUESTED | | <input type="text" value="50.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="406.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Melinda Beard | | Date of Receipt |
| Mailing Address 5019 42nd st, nw | | <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Washington | DC | 20016 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3132609 |
| Name of Employer PCRM | | Amount of Each Receipt this Period |
| Occupation outreach | | <input type="text" value="100.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="426.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Barbara G Beaver | | Date of Receipt |
| Mailing Address PO Box 46 | | <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Brookside | NJ | 07926 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3132245 |
| Name of Employer REQUESTED | | Amount of Each Receipt this Period |
| Occupation REQUESTED | | <input type="text" value="125.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="225.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="275.00"/> |
| 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 48 OF 2452 |
| | <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. Donna M. Beavers | | | Date of Receipt |
| Mailing Address 7024 Molohi St | | | <input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3126105 |
| Kailua Kono | HI | 96740 | 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="text" value="1000.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Joyce L. L Beck | | | Date of Receipt |
| Mailing Address 4751 Grapevine Terrace | | | <input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3125504 |
| Fort Worth | TX | 76123 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | <input type="text" value="50.00"/> |
| Name of Employer | Occupation | | |
| Texas Christian University, Extended E | Instructor of Litera | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="557.50"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Joyce L. L Beck | | | Date of Receipt |
| Mailing Address 4751 Grapevine Terrace | | | <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3132610 |
| Fort Worth | TX | 76123 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | <input type="text" value="100.00"/> |
| Name of Employer | Occupation | | |
| Texas Christian University, Extended E | Instructor of Litera | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="557.50"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="1150.00"/> |
| 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 49 OF 2452 |
| | <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. Leonora S. Becker | | Date of Receipt |
| Mailing Address 32856 Harmon | | <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Roseville | MI | 48066 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3128075 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="35.00"/> |
| Name of Employer | Occupation | |
| n/a | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="211.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Susan Beckerman | | Date of Receipt |
| Mailing Address 52 west 88th street | | <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| New York | NY | 10024 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3133969 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="225.00"/> |
| Name of Employer | Occupation | |
| n/a | retired | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="2725.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Ertem M Beckman | | Date of Receipt |
| Mailing Address 56 Shoreham Dr | | <input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Rochester | NY | 14618 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3131040 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="150.00"/> |
| Name of Employer | Occupation | |
| n/a | 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) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="410.00"/> |
| 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 50 OF 2452 |
| | <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. Patricia Bedi | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 02 / 2011 |
| Mailing Address 1010 Seagrove Ln Unit 1 | | Transaction ID : 3119615 |
| City Sarasota | State FL | Zip Code 34242 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 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 ▼ 250.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Donna M. Beestman | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 25 / 2011 |
| Mailing Address 9 Southwick Circle | | Transaction ID : 3135602 |
| City Madison | State WI | Zip Code 53717 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 10.00 |
| Name of Employer Manchester Inc | Occupation Consultant | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 330.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Tony Begg | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2011 |
| Mailing Address 825 Calle Mejia #402 | | Transaction ID : 3121931 |
| City Santa Fe | State NM | Zip Code 87501 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 76.00 |
| Name of Employer Data Ventures Inc | Occupation Statistical Modeler | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 216.12 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 336.00 |
| 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 51 OF 2452 |
| | (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

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Ms. Deborah A. Belchis | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 21 / 2011 |
| Mailing Address 10310 Cromwell Ct. | | Transaction ID : 3133614 |
| City Ellicott City | State MD | Zip Code 21042 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500.00 | |
| Name of Employer Physician | Occupation Pennsylvania State Univ. | |
| 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. Ms. Roberta A. Belideau-Hee | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2011 |
| Mailing Address 365 Bronx River Road Apt. 7 | | Transaction ID : 3130006 |
| City Yonkers | State NY | Zip Code 10704 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 150.00 | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 400.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Ms. Catherine Bell | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2011 |
| Mailing Address 156 Columbia Dr. | | Transaction ID : 3130008 |
| City Amherst | State MA | Zip Code 01002 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 35.00 | |
| Name of Employer Mount Holyoke Collete | Occupation Instructor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 385.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 685.00 |
| 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 52 OF 2452 |
| | <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. Rowland Bell | | Date of Receipt 12 / 07 / 2011 Transaction ID : 3123373 |
| Mailing Address 606 Fords Landing Way | | Amount of Each Receipt this Period 300.00 |
| City Alexandria | State VA | Zip Code 22314 |
| 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 ▼ 425.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Muriel Bell | | Date of Receipt 12 / 03 / 2011 Transaction ID : 3119887 |
| Mailing Address 350 Miramonte Avenue | | Amount of Each Receipt this Period 25.00 |
| City Palo Alto | State CA | Zip Code 94306 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Stanford University Press | Occupation Editor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 275.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Janet D. Bell | | Date of Receipt 12 / 15 / 2011 Transaction ID : 3128636 |
| Mailing Address 444 Central Park West Apt. 14 Apt. 14 B | | Amount of Each Receipt this Period 100.00 |
| City New York | State NY | Zip Code 10025 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer The Opportunity Agenda | Occupation Director of Communic | |
| 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).....▶ | 425.00 |
| 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 53 OF 2452 |
| | <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. 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 n/a Occupation Retired
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
12 / 07 / 2011
Transaction ID : 3123346
Amount of Each Receipt this Period
100.00

B. Ms. Pauline Bender
Full Name (Last, First, Middle Initial)
Mailing Address 6015 Verde Trl. S, Apt. L223
City Boca Raton State FL Zip Code 33433
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
12 / 22 / 2011
Transaction ID : 3134067
Amount of Each Receipt this Period
250.00

C. Lauren Benedict
Full Name (Last, First, Middle Initial)
Mailing Address 360A Vista Circle
City Macon State GA Zip Code 31204
FEC ID number of contributing federal political committee. **C**
Name of Employer The Boston Law Firm Occupation Attorney
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
12 / 20 / 2011
Transaction ID : 3133248
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 54 OF 2452
(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 K. Benefiel
 Full Name (Last, First, Middle Initial)
 Mailing Address 1308 17th Street
 City Lawrenceville State IL Zip Code 62439
 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 ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2011
Transaction ID : 3125865
 Amount of Each Receipt this Period
 100.00

B. Ms. Linda T. Bengel
 Full Name (Last, First, Middle Initial)
 Mailing Address 1007 Gaston Avenue
 City Austin State TX Zip Code 78703
 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 ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3127243
 Amount of Each Receipt this Period
 5000.00

C. Mr. Robert B. Benjamin
 Full Name (Last, First, Middle Initial)
 Mailing Address 4300 W. River Pkwy, Apt. 602
 City Minneapolis State MN Zip Code 55406
 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 ▼ 1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 3125425
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5110.00
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 2452 |
| | <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. Marsha E E Bennett | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2011 |
| Mailing Address 2335 Meadow Lane | | Transaction ID : 3133127 |
| City Juneau | State AK | Zip Code 99801 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 250.00 |
| Name of Employer n/a | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 610.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr. Jacob Bennison | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 6205 Mineral Point Road Apt. 2 Apt. 222 | | Transaction ID : 3128848 |
| City Madison | State WI | Zip Code 53705 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 50.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 700.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Lisa Benshoff | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2011 |
| Mailing Address 7500 Platter Terrace | | Transaction ID : 3125976 |
| City Easton | State MD | Zip Code 21601 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 10.00 |
| Name of Employer self | Occupation dog behavior consult | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 412.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 310.00 |
| 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 56 OF 2452
(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. Theodore Benson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1248 Como Blvd E
 City State Zip Code
 Saint Paul MN 55117
 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 ▼
 238.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126344
 Amount of Each Receipt this Period
 100.00

B. Ms. Barbara Benson
 Full Name (Last, First, Middle Initial)
 Mailing Address 115 Alhambra Pl
 City State Zip Code
 Edwards CO 81632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 312.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126257
 Amount of Each Receipt this Period
 100.00

C. Mr. Thomas Benton
 Full Name (Last, First, Middle Initial)
 Mailing Address 148 Briarwood Dr.
 City State Zip Code
 Lapeer MI 48446
 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 ▼
 220.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126341
 Amount of Each Receipt this Period
 120.12

SUBTOTAL of Receipts This Page (optional)..... ▶ 320.12
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 57 OF 2452 |
| | <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. Roger Berg
Full Name (Last, First, Middle Initial)

Mailing Address 8418 Franklin Avenue

City W. Hollywood State CA Zip Code 90069

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

Name of Employer Classic Fibres, Inc. Occupation Paper Broker

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
 12 / 12 / 2011
Transaction ID : 3125416

Amount of Each Receipt this Period
 250.00

B. Ms. Doris Bergen
Full Name (Last, First, Middle Initial)

Mailing Address 642 Shultz Dr.

City Hamilton State OH Zip Code 45013

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

Name of Employer Miami University Occupation Professor

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
 12 / 27 / 2011
Transaction ID : 3134387

Amount of Each Receipt this Period
 1000.00

C. Dr. Joan B. Berger
Full Name (Last, First, Middle Initial)

Mailing Address 6720 Robin Willow Ct.

City Dallas State TX Zip Code 75248

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

Name of Employer self Occupation psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134585

Amount of Each Receipt this Period
 140.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1390.00 |
| 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 58 OF 2452 |
| | <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. Toby Berger | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2011 |
| Mailing Address 810 Gilliams Mountain Rd. | | Transaction ID : 3124008 |
| City Charlottesville | State VA | Zip Code 22903 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 108.00 | |
| Name of Employer W. Virginia | Occupation PROF | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2492.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Mr. Toby Berger | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 810 Gilliams Mountain Rd. | | Transaction ID : 3128187 |
| City Charlottesville | State VA | Zip Code 22903 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 108.00 | |
| Name of Employer W. Virginia | Occupation PROF | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2492.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Ms. Nancy Bergfeld | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2011 |
| Mailing Address 2742 Wild Valley Dr | | Transaction ID : 3125938 |
| City High Ridge | State MO | Zip Code 63049 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25.00 | |
| Name of Employer Valley Park School District | Occupation Teacher | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 241.00 |
| 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 2452 |
| | <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. Steve Berman
Full Name (Last, First, Middle Initial)
Mailing Address 1101 75th Street # 16

| | | |
|----------------|-------------|-------------------|
| City Darien | State IL | Zip Code 60561 |
|----------------|-------------|-------------------|

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

| | |
|-------------------------------------|---------------------|
| Name of Employer Bill Kay Nissan | Occupation sales |
|-------------------------------------|---------------------|

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 |
| 12 | / | 31 | / | 2011 |

Transaction ID : 3138677

Amount of Each Receipt this Period
150.00

B. Ms. Rose E. Bernosky
Full Name (Last, First, Middle Initial)
Mailing Address 38319 Eucalyptus Dr.

| | | |
|---------------------|-------------|-------------------|
| City Zephyrhills | State FL | Zip Code 33542 |
|---------------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 06 | / | 2011 |

Transaction ID : 3122109

Amount of Each Receipt this Period
60.00

C. Ms. Susan Bernstein
Full Name (Last, First, Middle Initial)
Mailing Address 2625 Alcatraz # 260

| | | |
|------------------|-------------|-------------------|
| City Berkeley | State CA | Zip Code 94705 |
|------------------|-------------|-------------------|

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

| | |
|--------------------------|-------------------------------|
| Name of Employer Self | Occupation Psychotherapist |
|--------------------------|-------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
809.19

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 21 | / | 2011 |

Transaction ID : 3143374

Amount of Each Receipt this Period
809.19

[MEMO ITEM]
Stk-27 Shs Cinn Finan Corp

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 210.00 |
| 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 61 OF 2452 |
| | <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. Mrs. Susan D. Berrington | | Date of Receipt 12 / 14 / 2011 Transaction ID : 3128069 |
| Mailing Address 5920 Granby Rd. | | Amount of Each Receipt this Period 1000.00 |
| City Rockville | State MD | Zip Code 20855 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| 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. Ms. Sharon Bertsch | | Date of Receipt 12 / 19 / 2011 Transaction ID : 3131825 |
| Mailing Address 5233 Pullman Ave. NE | | Amount of Each Receipt this Period 1500.00 |
| City Seattle | State WA | Zip Code 98105 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self | Occupation Writer | |
| 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. Mrs. Sue Berzinis | | Date of Receipt 12 / 27 / 2011 Transaction ID : 3134928 |
| Mailing Address 99 Bender Ln. | | Amount of Each Receipt this Period 300.00 |
| City Delmar | State NY | Zip Code 12054 |
| 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 ▼ 400.00 | |

| | |
|--|---------|
| 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: | PAGE 62 OF 2452 |
| | (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. Diane Beu
Full Name (Last, First, Middle Initial)
Mailing Address 417 Bark Dr.
City Redwood City State CA Zip Code 94065
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
M M M / D D D / Y Y Y Y Y Y
12 / 14 / 2011
Transaction ID : 3127208
Amount of Each Receipt this Period
300.00

B. Ms. Lisa Beutler
Full Name (Last, First, Middle Initial)
Mailing Address 3920 El Ricon Way
City Sacramento State CA Zip Code 95864
FEC ID number of contributing federal political committee. **C**
Name of Employer MWH Occupation Manager
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
12 / 23 / 2011
Transaction ID : 3135390
Amount of Each Receipt this Period
35.00

C. Mr. Lawrence Bianco
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 125, LP-209
City Cornwall State PA Zip Code 17016
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 ▼ 605.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2011
Transaction ID : 3121300
Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 435.00 |
| 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 2452 |
| | <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. Martha R. Bibb
Full Name (Last, First, Middle Initial)
Mailing Address 567 S Sonora Circle
City Indialantic State FL Zip Code 32903
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 ▼ 240.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129275
Amount of Each Receipt this Period
200.00

B. Dr. Klaus Bibl
Full Name (Last, First, Middle Initial)
Mailing Address 1010 Waltham St., Apt. F-24
City Lexington State MA Zip Code 02421
FEC ID number of contributing federal political committee. **C**
Name of Employer Univ. of Mass. Lowell Occupation Physicist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 585.00

Date of Receipt
12 / 20 / 2011
Transaction ID : 3133404
Amount of Each Receipt this Period
50.00

C. Mrs. Nancy Kramer Bickel
Full Name (Last, First, Middle Initial)
Mailing Address 1033 Colusa Ave
City Berkeley State CA Zip Code 94707
FEC ID number of contributing federal political committee. **C**
Name of Employer none Occupation writer/producer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
12 / 12 / 2011
Transaction ID : 3126172
Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶ 1070.00
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 64 OF 2452 |
| | <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. Lawrence Biddle
Full Name (Last, First, Middle Initial)
Mailing Address 913 Prospect Court S
City St. Petersburg State FL Zip Code 33701
FEC ID number of contributing federal political committee. **C**
Name of Employer PlanningWorks LLC Occupation Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
12 / 30 / 2011
Transaction ID : 3138632
Amount of Each Receipt this Period 25.00

B. Ms. Lynne Biegler
Full Name (Last, First, Middle Initial)
Mailing Address 4 Olympia Place
City Pittsburgh State PA Zip Code 15217
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Musician/Reiki Maste
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
12 / 18 / 2011
Transaction ID : 3130026
Amount of Each Receipt this Period 75.00

C. Mr. Ben Bierman
Full Name (Last, First, Middle Initial)
Mailing Address 47438 Cholla St
City Fremont State CA Zip Code 94539
FEC ID number of contributing federal political committee. **C**
Name of Employer GlassPoint Solar Inc Occupation Engineering Executiv
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123735
Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
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 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <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)
EMILY's List

A. Ms. Wendy Billington
 Full Name (Last, First, Middle Initial)
 Mailing Address W10774 S. Huron Rd.
 City Plainfield State WI Zip Code 54966
 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 ▼ 325.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3128275
 Amount of Each Receipt this Period
 150.00

B. Ms. Margaret C. Bisberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 1506 Courtland Ave.
 City Park Ridge State IL Zip Code 60068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer IRS Occupation Revenue Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 12 / 21 / 2011
Transaction ID : 3133580
 Amount of Each Receipt this Period
 125.00

C. Dr. Evelyn Black
 Full Name (Last, First, Middle Initial)
 Mailing Address 2904 Lakewood Dr.
 City Denton State TX Zip Code 76207
 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 ▼ 260.00

Date of Receipt
 12 / 16 / 2011
Transaction ID : 3131460
 Amount of Each Receipt this Period
 125.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 400.00 |
| 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 2452 |
| | <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. Bernadeane Blackburn | | Date of Receipt |
| Mailing Address 32020 S Bella Vista Rd. | | <input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2011"/> |
| City | State | Transaction ID : 3133681 |
| Worley | ID | Amount of Each Receipt this Period |
| | 83876 | <input type="text" value="40.00"/> |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| n/a | Retired | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="213.75"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Barbara Blackmore | | Date of Receipt |
| Mailing Address 1145 Arbor Ln. | | <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2011"/> |
| City | State | Transaction ID : 3132212 |
| Richland Center | WI | Amount of Each Receipt this Period |
| | 53581 | <input type="text" value="100.00"/> |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| REQUESTED | REQUESTED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="425.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Barbara Blackstone | | Date of Receipt |
| Mailing Address 227 NE 61st Ave #2 | | <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2011"/> |
| City | State | Transaction ID : 3138684 |
| Portland | OR | Amount of Each Receipt this Period |
| | 97213 | <input type="text" value="25.00"/> |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| Blackstone Associates | Consultant | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="325.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="165.00"/> |
| 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 67 OF 2452 |
| | <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. Peggy Blair
Full Name (Last, First, Middle Initial)
Mailing Address 602 Rivage Circle

| | | |
|----------------|-------------|-------------------|
| City Folsom | State CA | Zip Code 95630 |
|----------------|-------------|-------------------|

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 ▼
288.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129591

Amount of Each Receipt this Period
24.00

B. Dr. Donna Wells Wells Blake
Full Name (Last, First, Middle Initial)
Mailing Address 10856 Parcel Court

| | | |
|----------------|-------------|-------------------|
| City Oakton | State VA | Zip Code 22124 |
|----------------|-------------|-------------------|

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

| | |
|--------------------------------------|-------------------------|
| Name of Employer Green Osprey LLC | Occupation Scientist |
|--------------------------------------|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1900.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 07 | / | 2011 |

Transaction ID : 3123504

Amount of Each Receipt this Period
100.00

C. Ms. Shirley I. Blancke
Full Name (Last, First, Middle Initial)
Mailing Address 579 Annurnsac Hill Rd.

| | | |
|-----------------|-------------|------------------|
| City Concord | State MA | Zip Code 1742 |
|-----------------|-------------|------------------|

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 |
| 12 | / | 20 | / | 2011 |

Transaction ID : 3133470

Amount of Each Receipt this Period
250.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 374.00 |
| 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 68 OF 2452 |
| | <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 L Blau
Full Name (Last, First, Middle Initial)

Mailing Address 8100 Parkdale Dr

City Austin State TX Zip Code 78757

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

Name of Employer Texas DFPS Occupation Systems Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129341

Amount of Each Receipt this Period
20.00

B. Ms. Sara J. Bleick
Full Name (Last, First, Middle Initial)

Mailing Address 4181 W. Kling St., #32

City Burbank State CA Zip Code 91505

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 ▼ **320.12**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 13 / 2011

Transaction ID : 3126712

Amount of Each Receipt this Period
100.00

C. Ms. Jennifer Blessing
Full Name (Last, First, Middle Initial)

Mailing Address 499 1st Street

City Brooklyn State NY Zip Code 11215

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

Name of Employer guggenheim museum Occupation curator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3128661

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **140.00**

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 2452 |
| | <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. Phoebe Blinder
Full Name (Last, First, Middle Initial)
Mailing Address 63B E. Gate Dr.
City Boynton Beach State FL Zip Code 33436
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 ▼ 252.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011
Transaction ID : 3128767
Amount of Each Receipt this Period
21.00

B. Ms. Chela Blitt
Full Name (Last, First, Middle Initial)
Mailing Address 1232 Peralta Ave
City Berkeley State CA Zip Code 94706
FEC ID number of contributing federal political committee. **C**
Name of Employer none Occupation homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2011
Transaction ID : 3130983
Amount of Each Receipt this Period
1000.00

C. Mrs. Susan Bloch
Full Name (Last, First, Middle Initial)
Mailing Address 16476 Refugio Rd
City Encino State CA Zip Code 91436
FEC ID number of contributing federal political committee. **C**
Name of Employer self employed Occupation occupational therapi
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2011
Transaction ID : 3121630
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶ 1071.00
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 70 OF 2452 |
| | <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 Block

Mailing Address 300 S. E. MIZNER BLVD. A903

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Boca Raton | FL | 33432 |

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 ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3128522

Amount of Each Receipt this Period
100.00

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

Mailing Address 369 Montezuma Ave., #310

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Santa Fe | NM | 87501 |

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
| Sekf | artist |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011

Transaction ID : 3137365

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Ms. Ginger Blomberg

Mailing Address 8787 Southside Blvd Apt. 5508

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Jacksonville | FL | 32256 |

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

| | |
|-----------------------------------|---------------------|
| Name of Employer | Occupation |
| Blue Cross Blue Shield of Florida | computer programmer |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129472

Amount of Each Receipt this Period
20.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 170.00 |
| 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 71 OF 2452 |
| | <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. Charlotte Bloomberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 147 Midwood St.
 City Brooklyn State NY Zip Code 11225
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134788
 Amount of Each Receipt this Period
 55.00

B. Mr. Lawrence D. Blum
 Full Name (Last, First, Middle Initial)
 Mailing Address 112 Clwyd Rd
 City Bala Cynwyd State PA Zip Code 19004
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : 3135267
 Amount of Each Receipt this Period
 125.00

C. Ms. Sandra Boatman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1947 Laurel Mountain Drive
 City Salem State VA Zip Code 24153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hollins University Occupation teacher
 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
 12 / 20 / 2011
Transaction ID : 3132625
 Amount of Each Receipt this Period
 250.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 430.00 |
| 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 72 OF 2452 |
| | <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. Barbara Boberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 Lake Avenue
 City Piedmont State CA Zip Code 94611
 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 ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129368
 Amount of Each Receipt this Period
 25.00

B. Mr. Whitney S. Bodman
 Full Name (Last, First, Middle Initial)
 Mailing Address 805 Leonard St.
 City Austin State TX Zip Code 78705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Austin Presbyterian Seminary Occupation Professor
 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
 12 / 27 / 2011
Transaction ID : 3134709
 Amount of Each Receipt this Period
 250.00

C. Ms. Joan P. Boegel
 Full Name (Last, First, Middle Initial)
 Mailing Address 772 Oak Oval
 City Mechanicsburg State PA Zip Code 17055
 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 ▼ 202.60

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130038
 Amount of Each Receipt this Period
 50.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 325.00 |
| 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 73 OF 2452 |
| | <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. Annette Boer
Full Name (Last, First, Middle Initial)
Mailing Address 3829 Chiselhurst Place
City Columbus State OH Zip Code 43220
FEC ID number of contributing federal political committee. **C**
Name of Employer none Occupation Retired physician
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 240.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3120359
Amount of Each Receipt this Period
200.00

B. Ardyce Bohlke
Full Name (Last, First, Middle Initial)
Mailing Address 7 Village Dr
City Hasting State NE Zip Code 68901
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation farmer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 335.00

Date of Receipt
12 / 16 / 2011
Transaction ID : 3131244
Amount of Each Receipt this Period
35.00

C. Ms. Janice Bohman
Full Name (Last, First, Middle Initial)
Mailing Address 1414 PITMAN AVE
City Palo Alto State CA Zip Code 94301
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation finance
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 234.00

Date of Receipt
12 / 16 / 2011
Transaction ID : 3131247
Amount of Each Receipt this Period
23.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 78.00
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 2452
(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. Robert Boland

Mailing Address 14712 Basigntoke Loop

City State Zip Code
Centreville VA 20120

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 ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3122875

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
B. Ms. Anne Boley

Mailing Address 1235 El Rado St.

City State Zip Code
Coral Gables FL 33134

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 ▼
1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3135136

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1818 E Susan Dr.

City State Zip Code
Fayetteville AR 72703

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 ▼
280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 3125468

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1065.00

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 2452 |
| | <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. Margaret Bolsterli
Full Name (Last, First, Middle Initial)
Mailing Address 1818 E Susan Dr.
City Fayetteville State AR Zip Code 72703
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 ▼ 280.00

Date of Receipt
12 / 27 / 2011
Transaction ID : 3134823
Amount of Each Receipt this Period
80.00

B. Mr. Fraser A. Bonnell
Full Name (Last, First, Middle Initial)
Mailing Address 316 Vassar Ave.
City Berkeley State CA Zip Code 94708
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 ▼ 360.00

Date of Receipt
12 / 13 / 2011
Transaction ID : 3126754
Amount of Each Receipt this Period
30.00

C. Ms. Aimee B. Boone
Full Name (Last, First, Middle Initial)
Mailing Address 6522 Belmead Dr
City Dallas State TX Zip Code 75230
FEC ID number of contributing federal political committee. **C**
Name of Employer Texas Democratic Trust Occupation Development Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
12 / 09 / 2011
Transaction ID : 3125857
Amount of Each Receipt this Period
1000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1110.00 |
| 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 76 OF 2452 |
| | <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. Phillip Bordanave
Full Name (Last, First, Middle Initial)

Mailing Address 3302 Waco Street Apt. 2

City San Diego State CA Zip Code 92117

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 ▼ 205.00

Date of Receipt
12 / 16 / 2011
Transaction ID : 3131250

Amount of Each Receipt this Period
25.00

B. Ms. Mary Borgaard
Full Name (Last, First, Middle Initial)

Mailing Address 8709 Red Brook Dr., Unit 103

City Las Vegas State NV Zip Code 89128

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 ▼ 1555.00

Date of Receipt
12 / 13 / 2011
Transaction ID : 3126808

Amount of Each Receipt this Period
1500.00

C. Ms. Ruth L. Born
Full Name (Last, First, Middle Initial)

Mailing Address 4205 Meridian Woods Dr.

City Valparaiso State IN Zip Code 46385

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 ▼ 400.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3131846

Amount of Each Receipt this Period
100.00

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: (check only one) | PAGE 77 OF 2452 |
| | <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. Mrs. Claudia Bosack
Full Name (Last, First, Middle Initial)
Mailing Address 17 Lansing St.
City Carmel State NY Zip Code 10512
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 **215.00**

Date of Receipt **12 / 20 / 2011**
Transaction ID : 3133381
Amount of Each Receipt this Period **115.00**

B. Ms. June Bourne
Full Name (Last, First, Middle Initial)
Mailing Address 469 Savstrom Way
City San Jose State CA Zip Code 95111
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 **326.00**

Date of Receipt **12 / 09 / 2011**
Transaction ID : 3125939
Amount of Each Receipt this Period **38.00**

C. Ms. June Bourne
Full Name (Last, First, Middle Initial)
Mailing Address 469 Savstrom Way
City San Jose State CA Zip Code 95111
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 **326.00**

Date of Receipt **12 / 18 / 2011**
Transaction ID : 3131122
Amount of Each Receipt this Period **38.00**

SUBTOTAL of Receipts This Page (optional)..... **191.00**
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 78 OF 2452 |
| | <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. Cynthia Bouton
Full Name (Last, First, Middle Initial)
Mailing Address 1401 Riverston Court
City Collete Station State TX Zip Code 77845
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 **240.00**

Date of Receipt
12 / 01 / 2011
Transaction ID : 3120064
Amount of Each Receipt this Period
200.00

B. Ms. Barbara Bovee
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 233
City Boulder Creek State CA Zip Code 95006
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
12 / 15 / 2011
Transaction ID : 3129334
Amount of Each Receipt this Period
25.00

C. Phyllis Bowen
Full Name (Last, First, Middle Initial)
Mailing Address 150 Le Moyne Pkwy
City Oak Park State IL Zip Code 60302
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 **350.00**

Date of Receipt
12 / 06 / 2011
Transaction ID : 3121879
Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... **195.00**
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 79 OF 2452 |
| | <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. Rae Bower | | Date of Receipt |
| Mailing Address 4475 Burton Forest Court SE | | <input type="text" value="12"/> / <input type="text" value="24"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Grand Rapids | MI | 49546 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3135397 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="25.00"/> |
| Name of Employer | Occupation | |
| Bower Marketing Services | Owner | |
| 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) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Mr. David Bower | | Date of Receipt |
| Mailing Address 868 BOYCE AVE | | <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| palo alto | CA | 94301 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3119430 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="25.00"/> |
| Name of Employer | Occupation | |
| David Bower Incorporated | ceo | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="625.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Evelyn J. Bowers | | Date of Receipt |
| Mailing Address 8806 Ridgehill Dr | | <input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Austin | TX | 78759 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3126009 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="25.00"/> |
| Name of Employer | Occupation | |
| REQUESTED | REQUESTED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="225.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="75.00"/> |
| 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 80 OF 2452 |
| | <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. Marguerite E Boyd | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2011 |
| Mailing Address 1011 W Gregory | | Transaction ID : 3138235 |
| City Normal | State IL | Zip Code 61761 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 30.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 210.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Mary Boyle | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 2264 Spring Creek Rd | | Transaction ID : 3127334 |
| City Decatur | State GA | Zip Code 30033 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 35.00 |
| Name of Employer Primus Software Corp. | Occupation SAP Consultant | |
| 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) C. Ms. Judy C. Bozeman | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address 15F W Shady Ln. | | Transaction ID : 3134496 |
| City Houston | State TX | Zip Code 77063 |
| 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).....▶ | 565.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 81 OF 2452
(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. Barbara Braak

Mailing Address 3829 82nd St

City Des Moines State IA Zip Code 50322

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 ▼
240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : 3128682

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Ms. Joan Braderman

Mailing Address 36 Fruit Street

City Northampton State MA Zip Code 01060

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

Name of Employer Hampshire College Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2011

Transaction ID : 3135964

Amount of Each Receipt this Period
40.00

Full Name (Last, First, Middle Initial)
C. Ms. Janice L L. Bradley

Mailing Address 910 SW 50th Way

City Gainesville State FL Zip Code 32607

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

Name of Employer Lake City Comm College Occupation Chemistry Instructor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : 3129137

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00

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 2452 |
| | <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. Kathleen Brady | | Date of Receipt |
| Mailing Address 149 fayerweather st | | <input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2011"/> |
| City Cambridge | State MA | Zip Code 02138 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3119707 |
| Name of Employer dept of public health, mass | | Amount of Each Receipt this Period |
| Occupation m.d. | | <input type="text" value="25.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| <input type="text" value="400.00"/> | | |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Olivia Brady | | Date of Receipt |
| Mailing Address 728 Stanbridge St | | <input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2011"/> |
| City Norristown | State PA | Zip Code 19401 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3133987 |
| Name of Employer The Vanguard Group | | Amount of Each Receipt this Period |
| Occupation Systems Analyst | | <input type="text" value="21.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| <input type="text" value="231.00"/> | | |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Tina Brand | | Date of Receipt |
| Mailing Address 75 Cleveland Street | | <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2011"/> |
| City Arlington | State MA | Zip Code 02474 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3133254 |
| Name of Employer Oracle | | Amount of Each Receipt this Period |
| Occupation Information Developpe | | <input type="text" value="15.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| <input type="text" value="240.00"/> | | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="61.00"/> |
| 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 83 OF 2452 |
| | <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. Mr. Matthew Brandon
Full Name (Last, First, Middle Initial)

Mailing Address 1621 S. Halsted, #501

| | | |
|-----------------|-------------|-------------------|
| City Chicago | State IL | Zip Code 60608 |
|-----------------|-------------|-------------------|

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

| | |
|-----------------------------------|-----------------------------------|
| Name of Employer SEIU Local 73 | Occupation Secretary/Treasurer |
|-----------------------------------|-----------------------------------|

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 |
| 12 | / | 14 | / | 2011 |

Transaction ID : 3128218

Amount of Each Receipt this Period
75.00

B. Mr. Robert Branyan
Full Name (Last, First, Middle Initial)

Mailing Address 5 Jane Lane

| | | |
|-----------------------|-------------|-------------------|
| City Sunrise Beach | State MO | Zip Code 65079 |
|-----------------------|-------------|-------------------|

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 ▼
360.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129302

Amount of Each Receipt this Period
30.00

C. Miss. Karen L. Braun
Full Name (Last, First, Middle Initial)

Mailing Address 8027 Cobble Creek Circle

| | | |
|-----------------|-------------|-------------------|
| City Potomac | State MD | Zip Code 20854 |
|-----------------|-------------|-------------------|

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 ▼
400.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 09 | / | 2011 |

Transaction ID : 3125833

Amount of Each Receipt this Period
200.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 305.00 |
| 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 84 OF 2452
(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 A Braunagel-Brown
 Full Name (Last, First, Middle Initial)
 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
 n/a Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 3126148
 Amount of Each Receipt this Period
 250.00

B. Mr. Byron G. G. Bray Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 56 Alma St.
 City State Zip Code
 San Francisco CA 94117
 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 ▼
 415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131934
 Amount of Each Receipt this Period
 115.00

C. Ms. Janet K Breid
 Full Name (Last, First, Middle Initial)
 Mailing Address 2317 Shepard Blvd
 City State Zip Code
 Columbia MO 65201
 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 ▼
 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128072
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 465.00
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 2452 |
| | <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. Mary E E Breitlow
 Full Name (Last, First, Middle Initial)
 Mailing Address 607 Ventura Street
 City Richmond State CA Zip Code 94805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129395
 Amount of Each Receipt this Period 35.00

B. Marcia Brekke
 Full Name (Last, First, Middle Initial)
 Mailing Address 3740 Knoll Ridge Dr
 City Saint Paul State MN Zip Code 55122
 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 ▼ 310.00

Date of Receipt 12 / 16 / 2011
Transaction ID : 3131135
 Amount of Each Receipt this Period 30.00

C. Mrs. Ricki Breskin-Kulkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 425 S. Willaman Drive Apt. 212
 City Los Angeles State CA Zip Code 90048
 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 ▼ 318.00

Date of Receipt 12 / 22 / 2011
Transaction ID : 3134321
 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 86 OF 2452
(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. Betty Breunig

Mailing Address 80 Lyme Rd Apt 320
Apt 320

City Hanover State NH Zip Code 03755

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 ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3122078

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Mr. Brad Brickman

Mailing Address 2024 Parkside Dr E

City Seattle State WA Zip Code 98112

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

Name of Employer Constellation HomeBuilder Systems Occupation Business Unit Manage

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128198

Amount of Each Receipt this Period
70.00

Full Name (Last, First, Middle Initial)
C. Mr. Harold Bright

Mailing Address HC 62 Box 90-A1

City Great Cacapon State WV Zip Code 25422

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 ▼
290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : 3123774

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 310.00

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 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Ms. Elyse Arnow Brill | | Date of Receipt 12 / 27 / 2011 Transaction ID : 3134382 |
| Mailing Address 12 Fancher Rd. | | Amount of Each Receipt this Period 250.00 |
| City Pound Ridge | State NY | Zip Code 10576 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Self | Occupation Consultant | |
| 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. Ms. Kathleen M. Brinkman | | Date of Receipt 12 / 15 / 2011 Transaction ID : 3128642 |
| Mailing Address 400 Pike Street, # 809 | | Amount of Each Receipt this Period 10.00 |
| City Cincinnati | State OH | Zip Code 45202 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 10.00 |
| Name of Employer Porter Wright Morris & Arthur LLP | Occupation Attorney | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 245.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Mary Broad | | Date of Receipt 12 / 11 / 2011 Transaction ID : 3125526 |
| Mailing Address 2025 E. Lincoln St., Apt. 1303 | | Amount of Each Receipt this Period 20.00 |
| City Bloomington | State IL | Zip Code 61701 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 20.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 285.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 280.00 |
| 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 88 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Mr. Peter Broadwell
 Full Name (Last, First, Middle Initial)
 Mailing Address 2325 Cornell St
 City Palo Alto State CA Zip Code 94306
 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 Y
 12 / 28 / 2011
Transaction ID : 3137702
 Amount of Each Receipt this Period
25.00

B. Dr. Gay Brookes
 Full Name (Last, First, Middle Initial)
 Mailing Address 122 W 75TH St Apt B
 City New York State NY Zip Code 10023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BMCC,CUNY Occupation Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128650
 Amount of Each Receipt this Period
50.00

C. Ms. Susan Whitmore Brooks
 Full Name (Last, First, Middle Initial)
 Mailing Address 2024 NEW HOPE ROAD
 City Charlotte State NC Zip Code 28203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation CLINICAL SOCIAL WORK
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **341.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3137503
 Amount of Each Receipt this Period
100.00

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 175.00 |
| 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 89 OF 2452
(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 A. Brosnan
 Full Name (Last, First, Middle Initial)
 Mailing Address 5431 Weybridge Road
 City Weybridge State VT Zip Code 05753
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : 3134179
 Amount of Each Receipt this Period
 75.00

B. Mrs. Sue B Brouillet
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O.Box 79
 4472 Lois Lane
 City Genesee State MI Zip Code 48437
 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 ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132460
 Amount of Each Receipt this Period
 25.00

C. Mrs. Sue B Brouillet
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O.Box 79
 4472 Lois Lane
 City Genesee State MI Zip Code 48437
 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 ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3139117
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00
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 90 OF 2452 |
| | <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 Broward
Full Name (Last, First, Middle Initial)
Mailing Address 1820 Stanford Road N
Apt. D
City Jacksonville State FL Zip Code 32207
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 ▼ 240.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129109
Amount of Each Receipt this Period
20.00

B. Mr. Peter Brown
Full Name (Last, First, Middle Initial)
Mailing Address 2012 Blue Mount Road
City Monkton State MD Zip Code 21111
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 ▼ 240.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129165
Amount of Each Receipt this Period
20.00

C. Ms. Sylvia M. Brown
Full Name (Last, First, Middle Initial)
Mailing Address 3718 Steelhead Drive
City Greenbank State WA Zip Code 98253
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 ▼ 360.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129200
Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 91 OF 2452 |
| | <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. Mary C. Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 1624 Grand Ave
 City Kalamazoo State MI Zip Code 49006
 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 ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 3125391
 Amount of Each Receipt this Period
 400.00

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 Crown Point Press Occupation Publisher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131921
 Amount of Each Receipt this Period
 1000.00

C. Ms. Judy H Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 1622 Jefferson Street
 City Duluth State MN Zip Code 55812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation retired attorney
 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
 12 / 15 / 2011
Transaction ID : 3128635
 Amount of Each Receipt this Period
 25.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1425.00 |
| 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

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

Mailing Address PO Box 2675

City Ramona State CA Zip Code 92065

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 ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2011
Transaction ID : 3131181

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Ms. Mary Lou Brown

Mailing Address 139 Via Baja

City Ventura State CA Zip Code 93003

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

Name of Employer REQUESTED Occupation housewife

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
 12 / 12 / 2011
Transaction ID : 3125419

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Ms. Mary Lou Brown

Mailing Address 139 Via Baja

City Ventura State CA Zip Code 93003

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

Name of Employer REQUESTED Occupation housewife

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
 12 / 27 / 2011
Transaction ID : 3134542

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00

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 93 OF 2452
(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. Virginia Lowrey Brown

Mailing Address 3115 Noela St

City Honolulu State HI Zip Code 96815

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 ▼ **525.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3139191

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
B. Ms. Zelda Brown

Mailing Address 6917 Avondale Ct.

City Nichols Hills State OK Zip Code 73116

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

Name of Employer Self Occupation Decorator

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
 12 / 19 / 2011
Transaction ID : 3131991

Amount of Each Receipt this Period
125.00

Full Name (Last, First, Middle Initial)
C. Dr. Carl Brown

Mailing Address 1260 Los Arcos Dr.

City Prescott State AZ Zip Code 86305

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

Name of Employer Youth Count Occupation Youth Coordinator

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
 12 / 20 / 2011
Transaction ID : 3133449

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **265.00**

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 2452 |
| | <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. 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 Homemaker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **550.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133447
 Amount of Each Receipt this Period
300.00

B. Ms. Carol Brownstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 2209 Commonwealth St
 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 **275.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129433
 Amount of Each Receipt this Period
25.00

C. Ms. Rebecca Bruder
 Full Name (Last, First, Middle Initial)
 Mailing Address 5144 Meaders 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 **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3125872
 Amount of Each Receipt this Period
1000.00

| | |
|---|----------------|
| SUBTOTAL of Receipts This Page (optional)..... | 1325.00 |
| 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 95 OF 2452
(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. Joanne E Bruggemann
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Lido Circle
 City State Zip Code
 Redwood City CA 94065
 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 ▼
 905.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119371
 Amount of Each Receipt this Period
 35.00

B. Ms. Eva Brunner
 Full Name (Last, First, Middle Initial)
 Mailing Address 2120 N Pacific Ave #53
 City State Zip Code
 Santa Cruz CA 95060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Accounting
 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
 12 / 01 / 2011
Transaction ID : 3119190
 Amount of Each Receipt this Period
 60.00

C. Ms. Eva Brunner
 Full Name (Last, First, Middle Initial)
 Mailing Address 2120 N Pacific Ave #53
 City State Zip Code
 Santa Cruz CA 95060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Accounting
 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
 12 / 20 / 2011
Transaction ID : 3132637
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 2452
(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. Jo Brun
 Full Name (Last, First, Middle Initial)
 Mailing Address 1902 N 51ST St
 City Milwaukee State WI Zip Code 53208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U.S.Bancorp Occupation Manager
 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
 12 / 15 / 2011
Transaction ID : 3128245
 Amount of Each Receipt this Period
 250.00

B. Ms. Kristine A. Brunt
 Full Name (Last, First, Middle Initial)
 Mailing Address 3814 Crown Bay #8
 City St. Thomas State VI Zip Code 00802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer msi building supplies Occupation owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 25 / 2011
Transaction ID : 3135660
 Amount of Each Receipt this Period
 100.00

C. Ms. Barbara Bry
 Full Name (Last, First, Middle Initial)
 Mailing Address 6327 La Pintura Drive
 City La Jolla State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blackbird Ventures Occupation investor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126762
 Amount of Each Receipt this Period
 1000.00

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 97 OF 2452 |
| | <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. Robert Bryan | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 06 / 2011 Transaction ID : 3121891 |
| Mailing Address 330 Quarry Ln | | Amount of Each Receipt this Period 700.00 |
| City Haverford | State PA | Zip Code 19041 |
| 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 ▼ 700.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Margaret Bryant | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 3129434 |
| Mailing Address 1028 Lantana Drive | | Amount of Each Receipt this Period 20.00 |
| City Los Angeles | State CA | Zip Code 90042 |
| 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 ▼ 220.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Amorette N Bryant | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 3128761 |
| Mailing Address 11430 Valley Spring | | Amount of Each Receipt this Period 25.00 |
| City Houston | State TX | Zip Code 77043 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self Employed | Occupation Consultant | |
| 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).....▶ | 745.00 |
| 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 2452 |
| | <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. Carolyn Buhl
Full Name (Last, First, Middle Initial)

Mailing Address 1128 Se 30th Ave

City Portland State OR Zip Code 97214

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 ▼ **340.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2011

Transaction ID : 3132638

Amount of Each Receipt this Period
100.00

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

Mailing Address 170 Arlington St

City Acton State MA Zip Code 01720

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
12 / 13 / 2011

Transaction ID : 3126488

Amount of Each Receipt this Period
50.00

C. Mrs. Mary L. L. Bundy
Full Name (Last, First, Middle Initial)

Mailing Address 170 East 79th Street

City New York State NY Zip Code 10075

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 ▼ **205.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : 3119363

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **170.00**

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 99 OF 2452 |
| | <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. Mamie G G. Burdick | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 1112 Huntsman Drive | | Transaction ID : 3128733 |
| City Durham | State NC | Zip Code 27713 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| Name of Employer Durham Public Schools | Occupation Teacher | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 325.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr. Matthew Burgess | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2011 |
| Mailing Address 1708 Newton St NW Apt 105 | | Transaction ID : 3119191 |
| City Washington | State DC | Zip Code 20010 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 |
| Name of Employer EMILY's List | Occupation Political Tracker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1049.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Mr. Matthew Burgess | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2011 |
| Mailing Address 1708 Newton St NW Apt 105 | | Transaction ID : 3124842 |
| City Washington | State DC | Zip Code 20010 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 111.00 |
| Name of Employer EMILY's List | Occupation Political Tracker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1049.00 | |

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| SUBTOTAL of Receipts This Page (optional).....▶ | 186.00 |
| 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 100 OF 2452 |
| | <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. Karen Burgess Smith | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2011 |
| Mailing Address 20 Main St. | | Transaction ID : 3126190 |
| City Exeter | State NH | Zip Code 03833 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| Name of Employer Phillips Exeter Academy | Occupation Gallery Director/Tea | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 275.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Mary E. Burgwinkle | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2011 |
| Mailing Address 1785 Sleepy Hollow Lane | | Transaction ID : 3137482 |
| City Plainfield | State NJ | Zip Code 07060 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer None | Occupation retired attorney | |
| 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. Mr. William T Burke | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 7735 57th Ave. NE | | Transaction ID : 3131992 |
| City Seattle | State WA | Zip Code 98115 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 125.00 |
| Name of Employer retired | Occupation law professor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 550.00 | |

| | |
|--|--------|
| 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 101 OF 2452 |
| | <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. Kellye Burke | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 4024 Case Street | | Transaction ID : 3128246 |
| City Houston | State TX | Zip Code 77005 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 250.00 | |
| Name of Employer Self | Occupation mom | |
| 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. James R. Burkhard | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2011 |
| Mailing Address 365 W Mayfair Ct. | | Transaction ID : 3135222 |
| City Boise | State ID | Zip Code 83706 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 75.00 | |
| Name of Employer n/a | Occupation RETIRED | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 693.75 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Ms. Jean Burling | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 20 Lang Road | | Transaction ID : 3128172 |
| City Cornish | State NH | Zip Code 03745 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 150.00 | |
| Name of Employer n/a | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |

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| SUBTOTAL of Receipts This Page (optional).....▶ | 475.00 |
| 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 2452 |
| | <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 Burling | | Date of Receipt |
| Mailing Address 18 Brown St | | <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2011"/> |
| City Cambridge | State MA | Zip Code 02138 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3127352 |
| Name of Employer n/a | 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="1500.00"/> |
| | <input type="text" value="1500.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Heather Burns | | Date of Receipt |
| Mailing Address 4 Millstone Road | | <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2011"/> |
| City Henrico | State VA | Zip Code 23228 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3130982 |
| Name of Employer n/a | 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="20.00"/> |
| | <input type="text" value="240.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Pamela Burroff-Murr | | Date of Receipt |
| Mailing Address 3653 North 50th West | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City Williamsport | State IN | Zip Code 47993 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3129336 |
| 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="25.00"/> |
| | <input type="text" value="275.00"/> | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="1545.00"/> |
| 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 103 OF 2452
(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. Pansy R. Burtis
 Full Name (Last, First, Middle Initial)
 Mailing Address 7401 Utica Apt. B
 City Lubbock State TX Zip Code 79424
 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 ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131101
 Amount of Each Receipt this Period
 200.00

B. Ms. Rosemary Burton
 Full Name (Last, First, Middle Initial)
 Mailing Address 3920 Buckingham Drive
 City Boise State ID Zip Code 83704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none at present Occupation Secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.11

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3139086
 Amount of Each Receipt this Period
 10.00

C. Ms. Jane Bush
 Full Name (Last, First, Middle Initial)
 Mailing Address 3000 Galloway Rdg Apt C302
 City Pittsboro State NC Zip Code 27312
 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
 12 / 27 / 2011
Transaction ID : 3134331
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 280.00
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 2452 |
| | (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. Fay R. Bussgang
Full Name (Last, First, Middle Initial)
Mailing Address 3118 Great Meadow Road
City Dedham State MA Zip Code 02026
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 ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 13 / 2011
Transaction ID : 3126650
Amount of Each Receipt this Period
100.00

B. Ms. Cheri Bustos
Full Name (Last, First, Middle Initial)
Mailing Address 2144 10th St. Place
City East Moline State IL Zip Code 61244
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 ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 18 / 2011
Transaction ID : 3131303
Amount of Each Receipt this Period
35.00

C. Mr. J. S. Butler
Full Name (Last, First, Middle Initial)
Mailing Address 111 Johnston Blvd.
City Lexington State KY Zip Code 40503
FEC ID number of contributing federal political committee. **C**
Name of Employer Connell University Occupation Economist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 19 / 2011
Transaction ID : 3131860
Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional).....▶ 260.00
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 2452 |
| | <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. June A Butler
Full Name (Last, First, Middle Initial)
Mailing Address 196 Taylor Rd
City Chehalis State WA Zip Code 98532
FEC ID number of contributing federal political committee. **C**
Name of Employer none Occupation homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 675.00

Date of Receipt
12 / 12 / 2011
Transaction ID : 3125439
Amount of Each Receipt this Period
50.00

B. Ms. Miriam B. Butterworth
Full Name (Last, First, Middle Initial)
Mailing Address 400 Seabury Dr., Apt. 2112
City Bloomfield State CT Zip Code 06002
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 ▼ 515.00

Date of Receipt
12 / 27 / 2011
Transaction ID : 3134381
Amount of Each Receipt this Period
125.00

C. Ms. Colleen Palmer Button
Full Name (Last, First, Middle Initial)
Mailing Address 1518 Stuart Road
City Herndon State VA Zip Code 20170
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 ▼ 230.00

Date of Receipt
12 / 18 / 2011
Transaction ID : 3131059
Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00
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 2452
(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. Caroline Bynum
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 Riverside Dr.
 City New York State NY Zip Code 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation retired professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131594
 Amount of Each Receipt this Period
 1000.00

B. Mr. Richard A Cable
 Full Name (Last, First, Middle Initial)
 Mailing Address 3835 Spencer Way
 City Sacramento State CA Zip Code 95821
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129138
 Amount of Each Receipt this Period
 20.00

C. Ms. Helen Cable
 Full Name (Last, First, Middle Initial)
 Mailing Address HC 3 Box 3921
 City Greenville State MO Zip Code 63944
 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 ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3125229
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1120.00
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 107 OF 2452 |
| | <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. Victor L. Cahn
Full Name (Last, First, Middle Initial)

Mailing Address 8 Crommelin Drive

City State Zip Code
Saratoga Springs NY 12866

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

Name of Employer Occupation
SKIDMORE COLLEGE PROFESSOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
12 / 23 / 2011
Transaction ID : 3135706

Amount of Each Receipt this Period
15.00

B. Mr. Richard D. Cain
Full Name (Last, First, Middle Initial)

Mailing Address 450 Cainpatch Lane

City State Zip Code
Westminster SC 29693

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 ▼
300.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129455

Amount of Each Receipt this Period
25.00

C. Mr. Timothy Caldwell
Full Name (Last, First, Middle Initial)

Mailing Address 27 Barker Ave, Apt 405

City State Zip Code
White Plains NY 10601

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 ▼
215.00

Date of Receipt
12 / 20 / 2011
Transaction ID : 3133185

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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 2452 |
| | <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. Janice M. Caldwell
 Full Name (Last, First, Middle Initial)
 Mailing Address 4700 Fox Creek Road
 City Carson City State NV Zip Code 89703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DHHS/CMS Occupation auditor
 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
 12 / 20 / 2011
Transaction ID : 3132642
 Amount of Each Receipt this Period
100.00

B. Ms. Ann G. Caldwell
 Full Name (Last, First, Middle Initial)
 Mailing Address 3390 Laurelwood Rd
 City Cosby State TN Zip Code 37722
 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
 12 / 05 / 2011
Transaction ID : 3122979
 Amount of Each Receipt this Period
250.00

C. Thomas Callow
 Full Name (Last, First, Middle Initial)
 Mailing Address 2719 Portobello Dr
 City Torrance State CA Zip Code 90505
 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 **625.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2011
Transaction ID : 3126064
 Amount of Each Receipt this Period
35.00

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 385.00 |
| 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 2452 |
| | <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 L. Cambridge
Full Name (Last, First, Middle Initial)

Mailing Address 4501 Connecticut Ave., nw Apt. #603

City Washington State DC Zip Code 20008

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

Name of Employer National Council of Teachers of Englis Occupation Association director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3128774

Amount of Each Receipt this Period 25.00

B. W. E. Campbell
Full Name (Last, First, Middle Initial)

Mailing Address 3634 S 17th St.

City Lincoln State NE Zip Code 68502

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 12 / 19 / 2011
Transaction ID : 3132184

Amount of Each Receipt this Period 50.00

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

Mailing Address 202 Holly Ridge Rd

City Chapel Hill State NC Zip Code 27516

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

Name of Employer resting easy Occupation retired, RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 12 / 08 / 2011
Transaction ID : 3124962

Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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 2452
(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 Canja

Mailing Address 1166 Winston St.

City State Zip Code
Port Charlotte FL 33952

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 ▼
255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134424

Amount of Each Receipt this Period
 55.00

Full Name (Last, First, Middle Initial)
B. Dr. Lisa Capell

Mailing Address 301 East 6TH Street

City State Zip Code
Duluth MN 55805

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

Name of Employer Occupation
SMDC physician

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
 12 / 15 / 2011
Transaction ID : 3129480

Amount of Each Receipt this Period
 25.00

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

Mailing Address 100 Diplomat Drive

City State Zip Code
Mount Kisco NY 10549

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

Name of Employer Occupation
well known pharmacy cashier

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
267.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130078

Amount of Each Receipt this Period
 11.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 91.00

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 111 OF 2452 |
| | <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. Patricia K. Carey
Full Name (Last, First, Middle Initial)

Mailing Address 3830 Claridge Oval

City State Zip Code
University Heights OH 44118

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 ▼
225.00

Date of Receipt
12 / 08 / 2011
Transaction ID : 3124716

Amount of Each Receipt this Period
15.00

B. Ms. Marijane L Carey
Full Name (Last, First, Middle Initial)

Mailing Address 26 Lincoln Street

City State Zip Code
Hamden CT 06518

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

Name of Employer Occupation
Self Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
337.50

Date of Receipt
12 / 31 / 2011
Transaction ID : 3139071

Amount of Each Receipt this Period
75.00

C. Ms. Diana Carleton
Full Name (Last, First, Middle Initial)

Mailing Address 3100 75th St. #4

City State Zip Code
Galveston TX 77551

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

Name of Employer Occupation
Self employed psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
12 / 20 / 2011
Transaction ID : 3132646

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00

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 112 OF 2452 |
| | (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. giuliano carlini | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2011 |
| Mailing Address 1605 el verano way | | | Transaction ID : 3130080 |
| City belmont | State CA | Zip Code 94002 | Amount of Each Receipt this Period 50.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer translattice | Occupation programmer | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | | |

| | | | |
|---|-------------------------------------|-------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Andrea S. Carlise | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2011 |
| Mailing Address 2835 Johnson Avenue | | | Transaction ID : 3130965 |
| City Alameda | State CA | Zip Code 94501 | Amount of Each Receipt this Period 85.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Patton Wolan Carlise, LLP | Occupation Attorney | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1020.00 | | |

| | | | |
|---|------------------------------------|-------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Linda Carlise | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address 233 Fisher Ave. | | | Transaction ID : 3134594 |
| City Brookline | State MA | Zip Code 02445 | Amount of Each Receipt this Period 300.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer self | Occupation consultant | | |
| 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).....▶ | 435.00 |
| 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 2452
(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. Susan Carlson | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2011 Transaction ID : 3121783 |
| Mailing Address 7638 165Th Pl | | | Amount of Each Receipt this Period 126.00 |
| City Tinley Park | State IL | Zip Code 60477 | |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date ▼ 426.00 | |
| 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. Carol E. Carlton | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2011 Transaction ID : 3135892 |
| Mailing Address 516 East Bay Drive | | | Amount of Each Receipt this Period 1000.00 |
| City Long Beach | State NY | Zip Code 11561 | |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date ▼ 1000.00 | |
| Name of Employer n/a | | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Mary Carmody Carmody | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 3128591 |
| Mailing Address 1742 Olive Ave. | | | Amount of Each Receipt this Period 150.00 |
| City Santa Barbara | State CA | Zip Code 93101 | |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date ▼ 320.00 | |
| Name of Employer True Blue, Inc. | | Occupation Office Manager | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 1276.00 |
| 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 2452 |
| | <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. Marty W W. Carpenter
 Full Name (Last, First, Middle Initial)
 Mailing Address 12245 N Antelope Run Rd
 City State Zip Code
 Prescott AZ 86305
 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 ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3135173
 Amount of Each Receipt this Period
 250.00

B. Ms. Denise Carr
 Full Name (Last, First, Middle Initial)
 Mailing Address 317 Wayland Avenue
 City State Zip Code
 East Lansing MI 48823
 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 ▼
 430.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126336
 Amount of Each Receipt this Period
 30.00

C. Dr. Sarah A Carter
 Full Name (Last, First, Middle Initial)
 Mailing Address 369 Belmont Acres Cir.
 City State Zip Code
 Tumbling Shoals AR 72581
 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 ▼
 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131930
 Amount of Each Receipt this Period
 140.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 420.00 |
| 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 115 OF 2452 |
| | <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. Ellen Carter
 Full Name (Last, First, Middle Initial)
 Mailing Address 1662 Snowmass Way
 City Durham State NC Zip Code 27713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Cross and Blue Shield of NC Occupation Business Analyst
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132320
 Amount of Each Receipt this Period
20.00

B. Ms. Judith Carter
 Full Name (Last, First, Middle Initial)
 Mailing Address 15550 Rockmont CT
 City Parker State CO Zip Code 80134
 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 **275.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2011
Transaction ID : 3125967
 Amount of Each Receipt this Period
25.00

C. Ms. Patricia Y. Carter
 Full Name (Last, First, Middle Initial)
 Mailing Address 205 SE Spokane Street #300 Suite #326
 City Portland State OR Zip Code 97202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self employed Occupation Attorney
 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
 12 / 01 / 2011
Transaction ID : 3119378
 Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... **95.00**
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 2452 |
| | <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. Louisa B. Cartledge
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 Tabernacle RD Apt 11215
 City Black Mountain State NC Zip Code 28711
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3122044
 Amount of Each Receipt this Period
 500.00

B. Colleen Cary
 Full Name (Last, First, Middle Initial)
 Mailing Address 298 Hayden Rowe St.
 City Hopkinton State MA Zip Code 01748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KIDS Occupation Mom
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129646
 Amount of Each Receipt this Period
 30.00

C. Dr. Leslie E. Cashel M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Tanglewood Dr.
 City Greenville State RI Zip Code 02828
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNIVERSITY GASTROENTEROLOGY Occupation Physician
 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
 12 / 06 / 2011
Transaction ID : 3122074
 Amount of Each Receipt this Period
 500.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1030.00 |
| 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 117 OF 2452
(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. Sarah L. Caspar
 Full Name (Last, First, Middle Initial)
 Mailing Address 525 Hopewell Rd
 City State Zip Code
 Downingtown PA 19335
 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 ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 25 / 2011
Transaction ID : 3135649
 Amount of Each Receipt this Period
 15.00

B. Mr. William S. Cassels
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 2983
 City State Zip Code
 Montgomery Village MD 20886
 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 ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131942
 Amount of Each Receipt this Period
 300.00

C. Ms. Sheila Castleberg
 Full Name (Last, First, Middle Initial)
 Mailing Address W2078 County Road K
 City State Zip Code
 Durand WI 54736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Farm
 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
 12 / 27 / 2011
Transaction ID : 3134754
 Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 440.00
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 2452 |
| | <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. Mr. Scott P. Catanzariti
 Full Name (Last, First, Middle Initial)
 Mailing Address 222 20TH Street #2
 City Huntington Beach State CA Zip Code 92648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SARA, Inc. Occupation Physicist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129494
 Amount of Each Receipt this Period
 300.00

B. Ms. Lorna Caulkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 1314 Elm Street
 City Grinnell State IA Zip Code 50112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Stewart Library Occupation Librarian
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128538
 Amount of Each Receipt this Period
 50.00

C. Mr. Jay C. Causey
 Full Name (Last, First, Middle Initial)
 Mailing Address 8011 SE 71st St.
 City Mercer Island State WA Zip Code 98040
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134735
 Amount of Each Receipt this Period
 125.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 205.00 |
| 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 119 OF 2452 |
| | <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. Linda Cavallero
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 Independence Lane
 City Shrewsbury State MA Zip Code 01545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer umass memorial medical ctr Occupation psychologist
 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
 12 / 15 / 2011
Transaction ID : 3129835
 Amount of Each Receipt this Period
 250.00

B. Loren Ceder
 Full Name (Last, First, Middle Initial)
 Mailing Address 5106 188th St. SW
 City Lynnwood State WA Zip Code 98037
 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 ▼ 270.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3132650
 Amount of Each Receipt this Period
 50.00

C. Dr. John I. Celenza
 Full Name (Last, First, Middle Initial)
 Mailing Address 49 Sweetwater Ave
 City Bedford State MA Zip Code 01730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Boston Universitu Occupation faculty member
 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
 12 / 19 / 2011
Transaction ID : 3132321
 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: PAGE 120 OF 2452
(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. Haroldene Cernansky

Mailing Address PO BOX 10277

City State Zip Code
Glendale AZ 85318

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

Name of Employer Occupation
retired engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132522

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
B. Ms. Maribeth C. Chadwell

Mailing Address 2415 Second Ave #629

City State Zip Code
Seattle WA 98121

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
 12 / 14 / 2011
Transaction ID : 3127374

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Ms. Lois Chaffee

Mailing Address 248 East 7th Street

City State Zip Code
New York NY 10009

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 ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130858

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00

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 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Dr. Barbara Chaffee | | Date of Receipt 12 / 20 / 2011 Transaction ID : 3132651 |
| Mailing Address 4 Gary St | | Amount of Each Receipt this Period 500.00 |
| City Binghamton | State NY | Zip Code 13905 |
| FEC ID number of contributing federal political committee. C | Name of Employer retired | Occupation retired physician |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 550.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Marguerite Chandler | | Date of Receipt 12 / 16 / 2011 Transaction ID : 3130822 |
| Mailing Address PO Box 250 707 East Lake Drive | | Amount of Each Receipt this Period 350.00 |
| City Cape May Point | State NJ | Zip Code 08212 |
| FEC ID number of contributing federal political committee. C | Name of Employer None | Occupation Retired executive |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 700.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) c. Ms. Jade Chang | | Date of Receipt 12 / 14 / 2011 Transaction ID : 3127241 |
| Mailing Address 127 Paloma Dr | | Amount of Each Receipt this Period 250.00 |
| City San Antonio | State TX | Zip Code 78212 |
| 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 | |

| | |
|--|---------|
| 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 122 OF 2452
(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. Violet Chappelow

Mailing Address 103 19th Street

City State Zip Code
Del Mar CA 92014

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
 12 / 13 / 2011
Transaction ID : 3126735

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Ms. Barbara Charlton

Mailing Address 1623 43rd Ave #3

City State Zip Code
Seattle WA 98112

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 ▼
215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133219

Amount of Each Receipt this Period
50.00

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

Mailing Address 150-10 79 ave.

City State Zip Code
flushing NY 11369

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

Name of Employer Occupation
not employed not 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
 12 / 01 / 2011
Transaction ID : 3119200

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

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 2452 |
| | <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. james chen | | Date of Receipt 12 / 20 / 2011 Transaction ID : 3132652 |
| Mailing Address 1060 lincoln ave | | Amount of Each Receipt this Period 250.00 |
| City palo alto | State CA | Zip Code 94301 |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date 250.00 |
| Name of Employer nvidia | Occupation engineer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-----------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Margaret S. Child | | Date of Receipt 12 / 10 / 2011 Transaction ID : 3125861 |
| Mailing Address 2853 Ontario Road NW Apt. 101 | | Amount of Each Receipt this Period 83.34 |
| City Washington | State DC | Zip Code 20009 |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date 1166.68 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Mary Chiorazzi | | Date of Receipt 12 / 13 / 2011 Transaction ID : 3126412 |
| Mailing Address 18 Bliss Ave | | Amount of Each Receipt this Period 100.00 |
| City Tenafly | State NJ | Zip Code 07670 |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date 300.00 |
| 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).....▶ | 433.34 |
| TOTAL This Period (last page this line 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 2452 |
| | <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. Laurie Chock

Mailing Address 59 Meadow Way

City Irvington State NY Zip Code 10533

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

Name of Employer self Occupation communications consu

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
 12 / 06 / 2011

Transaction ID : 3121873

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
B. Ms. Louise T Chow

Mailing Address 3012 Westmoreland Drive

City Mountain Brook State AL Zip Code 35223

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

Name of Employer University of Alabama at Birmingham Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011

Transaction ID : 3124721

Amount of Each Receipt this Period
100.00

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

Mailing Address 690 Valley Forge Road

City Cookeville State TN Zip Code 38501

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

Name of Employer Retired Educator Occupation Retired Professor of

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
 12 / 14 / 2011

Transaction ID : 3127380

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **350.00**

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 2452 |
| | (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. Brenda Christensen | | Date of Receipt |
| Mailing Address 223 purisima road | | <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Woodside | CA | 94062 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3132654 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="100.00"/> |
| Name of Employer | Occupation | |
| n/a | retired | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="235.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Dr. Christine B. Christensen | | Date of Receipt |
| Mailing Address 1231 Butlers Park Road | | <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Washington | NJ | 07882 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3133176 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="50.00"/> |
| Name of Employer | Occupation | |
| Self | educator | |
| 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) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Susan Christie | | Date of Receipt |
| Mailing Address 1003 Ashland Ct | | <input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Danville | CA | 94506 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3124730 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="40.00"/> |
| Name of Employer | Occupation | |
| Moore Business Forms | Sales Manager | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="475.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="190.00"/> |
| 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 126 OF 2452 |
| | <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 Christie
Full Name (Last, First, Middle Initial)
Mailing Address 1207 Jackson Ave., Apt. 205

| | | |
|---------------------|-------------|-------------------|
| City New Orleans | State LA | Zip Code 70130 |
|---------------------|-------------|-------------------|

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 ▼
275.12

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 28 | / | 2011 |

Transaction ID : 3135211

Amount of Each Receipt this Period
80.00

B. Dean Chu
Full Name (Last, First, Middle Initial)
Mailing Address 1278 Mandarin Dr

| | | |
|-------------------|-------------|-------------------|
| City Sunnyvale | State CA | Zip Code 94087 |
|-------------------|-------------|-------------------|

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 |
| 12 | / | 13 | / | 2011 |

Transaction ID : 3126413

Amount of Each Receipt this Period
150.00

C. Ms. Janis Church
Full Name (Last, First, Middle Initial)
Mailing Address 14521 S Ravinia Ave., Apt. 1S

| | | |
|---------------------|-------------|-------------------|
| City Orland Park | State IL | Zip Code 60462 |
|---------------------|-------------|-------------------|

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

| | |
|-------------------------------|--------------------------------|
| Name of Employer REQUESTED | Occupation RETIRED ENGINEER |
|-------------------------------|--------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 19 | / | 2011 |

Transaction ID : 3132176

Amount of Each Receipt this Period
50.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 280.00 |
| 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 127 OF 2452
(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. Marlene H Cianci
 Full Name (Last, First, Middle Initial)
 Mailing Address 1704 Glenkarney Pl
 City Silver Spring State MD Zip Code 20902
 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 ▼ 430.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129002
 Amount of Each Receipt this Period
 30.00

B. Ms. Judith Clark
 Full Name (Last, First, Middle Initial)
 Mailing Address 243 Promenade Avenue
 City Warwick State RI Zip Code 02886
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Portrait Painter
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3137610
 Amount of Each Receipt this Period
 100.00

C. Mr. Walter Clay
 Full Name (Last, First, Middle Initial)
 Mailing Address 203 High Street
 City Newburyport State MA Zip Code 01950
 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 ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3122877
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.00
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 128 OF 2452
(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. Eva M. Clayton
 Full Name (Last, First, Middle Initial)
 Mailing Address 177 Northside Dr
 City Littleton State NC Zip Code 27850
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3122869
 Amount of Each Receipt this Period
 15.00

B. Ms. Ellen Wright Clayton
 Full Name (Last, First, Middle Initial)
 Mailing Address 504 Fairfax Ave
 City Nashville State TN Zip Code 37212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vanderbilt Occupation professor
 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
 12 / 14 / 2011
Transaction ID : 3127384
 Amount of Each Receipt this Period
 250.00

C. Mr. Charles Clifton
 Full Name (Last, First, Middle Initial)
 Mailing Address 74 Potwine Lane
 City Amherst State MA Zip Code 01002
 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 M / D D D / Y Y Y Y Y Y
 12 / 18 / 2011
Transaction ID : 3130089
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 365.00
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 129 OF 2452 |
| | <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. Ann Cline | | | Date of Receipt |
| Mailing Address 1467 Monroe Street NW | | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3128990 |
| Washington | DC | 20010 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="200.00"/> |
| Name of Employer | Occupation | | |
| Bearing Point | Systems Analyst | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="240.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Andrea M. Clough | | | Date of Receipt |
| Mailing Address 3619 W. 79th St | | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3135085 |
| Indianapolis | IN | 46268 | 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 | | |
| n/a | 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) C. Ms. Penelope D Clute | | | Date of Receipt |
| Mailing Address 5 Cumberland Ave | | | <input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3126149 |
| Plattsburgh | NY | 12901 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="30.00"/> |
| Name of Employer | Occupation | | |
| New York State | Judge | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="330.00"/> | | |
| <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 130 OF 2452 |
| | <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. Mason Cobb | | Date of Receipt |
| Mailing Address 3013 363rd St. | | <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Federal Way | WA | 98003 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3132660 |
| Name of Employer | | Amount of Each Receipt this Period |
| Victoria Surgical Services | | <input type="text" value="250.00"/> |
| Occupation | | |
| Physician | | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="450.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Cindy Cochran | | Date of Receipt |
| Mailing Address 9500 SW 84th St. | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Denton | NE | 68339 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3134695 |
| Name of Employer | | Amount of Each Receipt this Period |
| City of Lincoln | | <input type="text" value="125.00"/> |
| Occupation | | |
| Librarian | | |
| 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. Connie Coddling | | Date of Receipt |
| Mailing Address PO Box 3550 | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Rohnert Park | CA | 94927 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3134786 |
| Name of Employer | | Amount of Each Receipt this Period |
| REQUESTED | | <input type="text" value="100.00"/> |
| Occupation | | |
| 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="475.00"/> |
| 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 131 OF 2452
(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. Mark Coe

Mailing Address 265 W. Eldon St., Apt. 6

City State Zip Code
Saint James MO 65559

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 ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2011
Transaction ID : 3135693

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Mr. Edward Coe

Mailing Address 206 HEATHER LN

City State Zip Code
Columbia MO 65203

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

Name of Employer Occupation
N/A N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119202

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Mr. Edward Coe

Mailing Address 206 HEATHER LN

City State Zip Code
Columbia MO 65203

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

Name of Employer Occupation
N/A N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3132661

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

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 2452 |
| | <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. Alexandra Coe | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 3827 Sheridan Ave. S. | | Transaction ID : 3129543 |
| City Minneapolis | State MN | Zip Code 55410 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50.00 | |
| Name of Employer none | Occupation artist | |
| 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) B. Ms. Mary Cogswell | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 22 / 2011 |
| Mailing Address 1931 Mercedes Ct. NE | | Transaction ID : 3134078 |
| City Atlanta | State GA | Zip Code 30345 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 300.00 | |
| Name of Employer Federal Government | Occupation Epidemiologist | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 900.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Mr. Peter L. Cohen | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 11503 Murcia Drive | | Transaction ID : 3128988 |
| City Austin | State TX | Zip Code 78759 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 20.00 | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 370.00 |
| 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 133 OF 2452 |
| | <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. Lizabeth A Cohen
Full Name (Last, First, Middle Initial)

Mailing Address 232 Washington St.

City Belmont State MA Zip Code 2478

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

Name of Employer Harvard University Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **415.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3133376

Amount of Each Receipt this Period
115.00

B. Ms. Melanie Cohen
Full Name (Last, First, Middle Initial)

Mailing Address 115 S. Guadalupe Avenue

City Redondo Beach State CA Zip Code 90277

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 ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129371

Amount of Each Receipt this Period
20.00

C. Mr. Robert Cohen
Full Name (Last, First, Middle Initial)

Mailing Address 2617 Waunona Way

City Madison State WI Zip Code 53713

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
 12 / 27 / 2011

Transaction ID : 3134791

Amount of Each Receipt this Period
300.00

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 435.00 |
| 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 2452 |
| | <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. Naomi Cohen
Full Name (Last, First, Middle Initial)

Mailing Address POB 39

City State Zip Code
Gap Mills WV 24941

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

Name of Employer Occupation
Self employed businesswoman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2011

Transaction ID : 3136186

Amount of Each Receipt this Period
75.00

B. Dr. margaret F Cohn
Full Name (Last, First, Middle Initial)

Mailing Address 33 Graham Drive

City State Zip Code
Athens OH 45701

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 ▼
205.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : 3124144

Amount of Each Receipt this Period
10.00

C. Dr. margaret F Cohn
Full Name (Last, First, Middle Initial)

Mailing Address 33 Graham Drive

City State Zip Code
Athens OH 45701

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 ▼
205.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : 3129247

Amount of Each Receipt this Period
15.00

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 100.00 |
| 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 2452 |
| | <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. Arthur Cohn

Mailing Address 7906 Spruce Mill Dr.

City Morrisville State PA Zip Code 19067

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 ▼
205.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3132054

Amount of Each Receipt this Period
80.00

Full Name (Last, First, Middle Initial)
B. Mrs. Nancy A. Cohn

Mailing Address 100 Shawnee Rd.

City Ardmore State PA Zip Code 19003

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 ▼
220.00

Date of Receipt
12 / 27 / 2011
Transaction ID : 3134653

Amount of Each Receipt this Period
55.00

Full Name (Last, First, Middle Initial)
C. Ms. Julianne G. Cohn

Mailing Address 3275 Lenox Rd. NE, Apt. 108

City Atlanta State GA Zip Code 30324

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 ▼
825.00

Date of Receipt
12 / 20 / 2011
Transaction ID : 3133504

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional).....▶ 260.00

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 2452 |
| | <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. Patricia S. Cohn
Full Name (Last, First, Middle Initial)
Mailing Address 8915 Village Dr.
City San Antonio State TX Zip Code 78217
FEC ID number of contributing federal political committee. **C**
Name of Employer Prudential Securities Occupation Stockbroker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **550.00**

Date of Receipt **12 / 27 / 2011**
Transaction ID : 3134488
Amount of Each Receipt this Period **100.00**

B. Ms. Syma C. Cohn
Full Name (Last, First, Middle Initial)
Mailing Address 4848 Russell Avenue S.
City Minneapolis State MN Zip Code 55410
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation Writer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **365.00**

Date of Receipt **12 / 20 / 2011**
Transaction ID : 3133190
Amount of Each Receipt this Period **20.00**

C. Ms. Dee K. Coil
Full Name (Last, First, Middle Initial)
Mailing Address 3168 Cafeto Drive
City Walnut Creek State CA Zip Code 94598
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation Educational Therapis
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1200.00**

Date of Receipt **12 / 19 / 2011**
Transaction ID : 3132480
Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **220.00**
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 137 OF 2452
(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. Melinda L. Coker
 Full Name (Last, First, Middle Initial)
 Mailing Address 4411 Cascades Shoreline Dr.
 City Tyler State TX Zip Code 75709
 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 ▼ 255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132267
 Amount of Each Receipt this Period
 20.00

B. Ms. Heather L Colburn
 Full Name (Last, First, Middle Initial)
 Mailing Address 1320 Rutledge St
 City Madison State WI Zip Code 53703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DSCC Occupation Campaign Services Di
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129096
 Amount of Each Receipt this Period
 60.00

C. Ms. Kathleen Colburn
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 162
 City Loyalton State CA Zip Code 96118
 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 ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2011
Transaction ID : 3120029
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 138 OF 2452 |
| | <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 Colby
Full Name (Last, First, Middle Initial)
Mailing Address 4109 Happy Valley Road
City Lafayette State CA Zip Code 94549
FEC ID number of contributing federal political committee. **C**
Name of Employer Stupski Foundation Occupation Nonprofit Executive
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
12 / 10 / 2011
Transaction ID : 3125532
Amount of Each Receipt this Period
250.00

B. Ms. Nancy S. Cole
Full Name (Last, First, Middle Initial)
Mailing Address 10475 Cross St
City Hammondspport State NY Zip Code 14840
FEC ID number of contributing federal political committee. **C**
Name of Employer GALLOWAY SCHOOL Occupation RETIRED TEACHER/COUN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2011
Transaction ID : 3125836
Amount of Each Receipt this Period
25.00

C. Ms. Joyce Coleman
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2033
City Norman State OK Zip Code 73070
FEC ID number of contributing federal political committee. **C**
Name of Employer University of Oklahoma Occupation professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011
Transaction ID : 3129406
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 295.00
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 139 OF 2452
(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. Ms. Marie Collamore

Mailing Address 7 Perkins Ave.

City Reading State MA Zip Code 01867

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 ▼ **700.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131926

Amount of Each Receipt this Period
125.00

Full Name (Last, First, Middle Initial)
B. Ms. Virginia Collins

Mailing Address 1510 Bradley Ave.

City Rockville State MD Zip Code 20851

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 ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : 3134100

Amount of Each Receipt this Period
115.00

Full Name (Last, First, Middle Initial)
C. Mr. Robert N. Colombo

Mailing Address 4826 Chevy Chase Blvd.

City Chevy Chase State MD Zip Code 20815

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 ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131425

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **340.00**

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 2452 |
| | <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. Jean Colonomos
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 708

| | | |
|---|------------------------------------|-------------------|
| City Topanga | State CA | Zip Code 90290 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer self | Occupation writer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

Date of Receipt
12 / 11 / 2011
Transaction ID : 3125534

Amount of Each Receipt this Period
50.00

B. Ms. Jean Colonomos
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 708

| | | |
|---|------------------------------------|-------------------|
| City Topanga | State CA | Zip Code 90290 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer self | Occupation writer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

Date of Receipt
12 / 28 / 2011
Transaction ID : 3137629

Amount of Each Receipt this Period
10.00

C. Ms. Gloria R. Combe
Full Name (Last, First, Middle Initial)
Mailing Address 21671 Welch Rd.

| | | |
|---|------------------------------------|-------------------|
| City Northville | State MI | Zip Code 48167 |
| 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 ▼ 300.00 | |

Date of Receipt
12 / 05 / 2011
Transaction ID : 3121184

Amount of Each Receipt this Period
125.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 185.00 |
| 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 2452 |
| | <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 a A. Compton
Full Name (Last, First, Middle Initial)

Mailing Address pobox 11524

City Takoma Park State MD Zip Code 20913

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

Name of Employer self Occupation artist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **610.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011

Transaction ID : 3126017

Amount of Each Receipt this Period
10.00

B. Ms. dorothy a A. Compton
Full Name (Last, First, Middle Initial)

Mailing Address pobox 11524

City Takoma Park State MD Zip Code 20913

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

Name of Employer self Occupation artist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **610.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3134004

Amount of Each Receipt this Period
10.00

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

Mailing Address 224 Conewango Ave

City Warren State PA Zip Code 16365

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 ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3128291

Amount of Each Receipt this Period
100.00

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 120.00 |
| 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 2452 |
| | <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. Lee G Cone
 Full Name (Last, First, Middle Initial)
 Mailing Address 1090 Kupulau Drive
 City Kihei State HI Zip Code 96753
 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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3127391
 Amount of Each Receipt this Period
 200.00

B. Richard Cone
 Full Name (Last, First, Middle Initial)
 Mailing Address 302 Oakdale RD
 City Baltimore State MD Zip Code 21210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Johns Hopkins University Occupation Professor
 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
 12 / 20 / 2011
Transaction ID : 3132665
 Amount of Each Receipt this Period
 250.00

C. Mrs. Noel R. Congdon
 Full Name (Last, First, Middle Initial)
 Mailing Address 1510 East 10th Ave.
 City Denver State CO Zip Code 80218
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011
Transaction ID : 3120090
 Amount of Each Receipt this Period
 3000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3450.00 |
| 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 143 OF 2452 |
| | (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

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Mrs. Lois Conklin | | Date of Receipt |
| Mailing Address 18 Maher Road | | <input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Slingerlands | NY | 12159 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3126256 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="62.00"/> |
| Name of Employer | Occupation | |
| REQUESTED | REQUESTED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="212.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Roberta R R. Conlan | | Date of Receipt |
| Mailing Address 312 W Columbia St | | <input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Falls Church | VA | 22046 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3125982 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="20.00"/> |
| Name of Employer | Occupation | |
| Self | Editor | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="290.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Janet M Conn | | Date of Receipt |
| Mailing Address 5804 Oak Ln | | <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Minneapolis | MN | 55436 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3131821 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="300.00"/> |
| Name of Employer | Occupation | |
| n/a | Retired | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="600.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="382.00"/> |
| 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 144 OF 2452 |
| | <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. Dr. Orabelle Connally
 Full Name (Last, First, Middle Initial)
 Mailing Address 2326 California Ave. SW, Apt. Apt. 232
 City Seattle State WA Zip Code 98116
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134473
 Amount of Each Receipt this Period
 150.00

B. Ms. Cindy Connelly Ryan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1039 Cresthaven Drive
 City Silver Spring State MD Zip Code 20903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Library of Congress Occupation research scientist
 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
 12 / 11 / 2011
Transaction ID : 3125924
 Amount of Each Receipt this Period
 25.00

C. Mr. George Conner
 Full Name (Last, First, Middle Initial)
 Mailing Address 8612 State Route 167
 City Kingsley State PA Zip Code 18826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tall Pines Farm Inc Occupation self employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126342
 Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 275.00 |
| 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 145 OF 2452 |
| | <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. Michael Connolly
Full Name (Last, First, Middle Initial)

Mailing Address 27 North Moore Street, 7F

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10013 |
|------------------|-------------|-------------------|

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

| | |
|--|----------------------|
| Name of Employer Morrison Cohen LLP | Occupation Lawyer |
|--|----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1220.12

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2011 |

Transaction ID : 3133196

Amount of Each Receipt this Period
350.00

B. Mr. Albert B. Cook
Full Name (Last, First, Middle Initial)

Mailing Address 1501 Inverness Dr Apt 119

| | | |
|------------------|-------------|-------------------|
| City Lawrence | State KS | Zip Code 66047 |
|------------------|-------------|-------------------|

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 ▼
220.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129402

Amount of Each Receipt this Period
20.00

C. Ms. Elizabeth J. Cook
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 72511

| | | |
|------------------|-------------|-------------------|
| City Fairbank | State AK | Zip Code 99707 |
|------------------|-------------|-------------------|

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 ▼
225.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 03 | / | 2011 |

Transaction ID : 3119976

Amount of Each Receipt this Period
25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 395.00 |
| 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 2452 |
| | <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. Anthony S. Cookson
Full Name (Last, First, Middle Initial)

Mailing Address 1908

City Los Angeles State CA Zip Code 90025

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

Name of Employer Self Occupation Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1360.00

Date of Receipt
12 / 31 / 2011
Transaction ID : 3139137

Amount of Each Receipt this Period
100.00

B. Ms. Angela Perry Cooley
Full Name (Last, First, Middle Initial)

Mailing Address 1314 W. Market Street

City Crawfordsville State IN Zip Code 47933

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 ▼
1100.00

Date of Receipt
12 / 16 / 2011
Transaction ID : 3131462

Amount of Each Receipt this Period
100.00

C. Ms. Christina Coolidge
Full Name (Last, First, Middle Initial)

Mailing Address 4570 Van Nuys Blvd. PMB 494

City Sherman Oaks State CA Zip Code 91403

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 ▼
750.00

Date of Receipt
12 / 31 / 2011
Transaction ID : 3138739

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

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 2452 |
| | <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

A. Mr. Kevin R. Coombes
 Full Name (Last, First, Middle Initial)
 Mailing Address 6624 Westchester Ave.
 City Houston State TX Zip Code 77005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U of MD Occupation Mathematician
 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
 12 / 27 / 2011
Transaction ID : 3134397
 Amount of Each Receipt this Period
 250.00

B. Ms. Cythina Cooper
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Fieldstone Court
 City Chapel Hill State NC Zip Code 27514
 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 ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2011
Transaction ID : 3119984
 Amount of Each Receipt this Period
 30.00

c. Mrs. Connie L Cooper
 Full Name (Last, First, Middle Initial)
 Mailing Address 38617 N 25 Ln
 City Desert Hills State AZ Zip Code 85086
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129469
 Amount of Each Receipt this Period
 20.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 300.00 |
| 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 148 OF 2452 |
| | <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. Kay Cooper
 Full Name (Last, First, Middle Initial)
 Mailing Address 6501 Meadow View Road
 City Hillsborough State NC Zip Code 27278
 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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2011
Transaction ID : 3119882
 Amount of Each Receipt this Period
 200.00

B. Ms. Jane Cooper
 Full Name (Last, First, Middle Initial)
 Mailing Address 334 San Rafael Ave
 City Belvedere State CA Zip Code 94920
 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 ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3125545
 Amount of Each Receipt this Period
 1000.00

C. Ms. Mary Cooper
 Full Name (Last, First, Middle Initial)
 Mailing Address 1165 5th Avenue
 City New York State NY Zip Code 10029
 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 ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3132274
 Amount of Each Receipt this Period
 1500.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2520.00 |
| 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 2452 |
| | <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 Cooper
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1347

| | | |
|--------------------|-------------|-------------------|
| City Los Alamos | State NM | Zip Code 87544 |
|--------------------|-------------|-------------------|

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

| | |
|--------------------------------------|---------------------------------|
| Name of Employer U OF CALIF, RETD | Occupation RETIRED PHYSICIST |
|--------------------------------------|---------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **362.50**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 08 | / | 2011 |

Transaction ID : 3124025

Amount of Each Receipt this Period

| |
|-------|
| 50.00 |
|-------|

B. Ms. Harriet R. Copel
Full Name (Last, First, Middle Initial)
Mailing Address 14 Monett Place

| | | |
|-------------------|-------------|-------------------|
| City Greenlawn | State NY | Zip Code 11740 |
|-------------------|-------------|-------------------|

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

| | |
|-------------------------------------|------------------------|
| Name of Employer school district | Occupation educator |
|-------------------------------------|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 05 | / | 2011 |

Transaction ID : 3120421

Amount of Each Receipt this Period

| |
|-------|
| 20.00 |
|-------|

C. Ms. Marion L. Copenhaver
Full Name (Last, First, Middle Initial)
Mailing Address 80 Lyme Road, Apt. 158

| | | |
|-----------------|-------------|-------------------|
| City Hanover | State NH | Zip Code 03755 |
|-----------------|-------------|-------------------|

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 ▼ **370.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 05 | / | 2011 |

Transaction ID : 3121523

Amount of Each Receipt this Period

| |
|--------|
| 100.00 |
|--------|

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 170.00 |
| 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 2452 |
| | <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. Marion L. Copenhaver
Full Name (Last, First, Middle Initial)

Mailing Address 80 Lyme Road, Apt. 158

| | | |
|-----------------|-------------|-------------------|
| City Hanover | State NH | Zip Code 03755 |
|-----------------|-------------|-------------------|

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 ▼ **370.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3130869

Amount of Each Receipt this Period

| |
|--------|
| 370.00 |
|--------|

B. Ms. Joan K. Cordani
Full Name (Last, First, Middle Initial)

Mailing Address 38 Old Route 55

| | | |
|-----------------|-------------|-------------------|
| City Pawling | State NY | Zip Code 12564 |
|-----------------|-------------|-------------------|

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

| | |
|---|-------------------------------|
| Name of Employer NY state/Lynbrook Bd. Educ. | Occupation Retired teacher |
|---|-------------------------------|

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128975

Amount of Each Receipt this Period

| |
|-------|
| 50.00 |
|-------|

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

Mailing Address 51 Moore Rd

| | | |
|-----------------|-------------|-------------------|
| City Wayland | State MA | Zip Code 01778 |
|-----------------|-------------|-------------------|

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

| | |
|-----------------------------------|------------------------------------|
| Name of Employer Cisco Systems | Occupation Information Technolo |
|-----------------------------------|------------------------------------|

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 |
| 12 | / | 20 | / | 2011 |

Transaction ID : 3132669

Amount of Each Receipt this Period

| |
|--------|
| 250.00 |
|--------|

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 320.00 |
| 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 2452 |
| | <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. Laura Corogenes
 Full Name (Last, First, Middle Initial)
 Mailing Address 648 Romany
 City Kansas City State MO Zip Code 64113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Specialty Global Insurance Services Occupation Chief Underwriting Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129528
 Amount of Each Receipt this Period
35.00

B. Ms. Judith Corwin
 Full Name (Last, First, Middle Initial)
 Mailing Address 217 Serena Drive
 City Palm Desert State CA Zip Code 92260
 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 **425.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119206
 Amount of Each Receipt this Period
75.00

C. Ms. Judith Corwin
 Full Name (Last, First, Middle Initial)
 Mailing Address 217 Serena Drive
 City Palm Desert State CA Zip Code 92260
 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 **425.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130109
 Amount of Each Receipt this Period
200.00

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 310.00 |
| 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 152 OF 2452 |
| | <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. Luene H. Corwin | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address 1119 Loma Vista Way | | Transaction ID : 3134601 |
| City Vista | State CA | Zip Code 92084 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 300.00 | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 550.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Ms. Doris B. Coster | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 123 River Road | | Transaction ID : 3132433 |
| City East Haddam | State CT | Zip Code 06423 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50.00 | |
| Name of Employer n/a | Occupation Retired | |
| 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. Doris B. Coster | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 123 River Road | | Transaction ID : 3140589 |
| City East Haddam | State CT | Zip Code 06423 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25.00 | |
| Name of Employer n/a | 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).....▶ | 375.00 |
| 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 2452 |
| | <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. Allen Coulter | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 22 / 2011 |
| Mailing Address 250 W. 57th Street, 26th Floor | | Transaction ID : 3134186 |
| City New York | State NY | Zip Code 10107 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 150.00 | |
| Name of Employer Freelance | Occupation Director | |
| 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. Elizabeth A. Courtenay | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 1800 6TH Street | | Transaction ID : 3129293 |
| City Manhattan Beach | State CA | Zip Code 90266 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50.00 | |
| Name of Employer CA APPELLATE PROJECT | Occupation ATTORNEY | |
| 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. Patricia Courtney | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2011 |
| Mailing Address 5200 62nd Ave S | | Transaction ID : 3131614 |
| City St. Petersburg | State FL | Zip Code 33715 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 250.00 | |
| Name of Employer n/a | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2550.00 | |

| | |
|--|--------|
| 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 154 OF 2452 |
| | <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. Frances Courtsal
 Full Name (Last, First, Middle Initial)
 Mailing Address 1208 Woodland Road
 City Pittsburgh State PA Zip Code 15237
 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 ▼ 300.00

Date of Receipt
 12 / 06 / 2011
Transaction ID : 3122986
 Amount of Each Receipt this Period
 300.00

B. Ms. Joy Cousminer
 Full Name (Last, First, Middle Initial)
 Mailing Address 350 W 14th St., Apt. 3D
 City New York State NY Zip Code 10014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bethex FCU Occupation Credit Union Treasurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 12 / 27 / 2011
Transaction ID : 3134568
 Amount of Each Receipt this Period
 50.00

C. Ms. Carolyn Covington
 Full Name (Last, First, Middle Initial)
 Mailing Address 3350 N Clark-Wolverine Road
 City Palmer State AK Zip Code 99645
 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 ▼ 240.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3128813
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 370.00
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 155 OF 2452 |
| | <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. Marilyn Cowger | | Date of Receipt |
| Mailing Address 7230 Bailey Rd. | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City Clinton | State WA | Zip Code 98236 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3134598 |
| Name of Employer n/a | | Amount of Each Receipt this Period |
| Occupation Retired | | <input type="text" value="115.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | <input type="text" value="415.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Karen Cox | | Date of Receipt |
| Mailing Address 15214 Manzanita Diggins Dr. | | <input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2011"/> |
| City Nevada City | State CA | Zip Code 95959 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3131430 |
| Name of Employer n/a | | Amount of Each Receipt this Period |
| Occupation RETIRED | | <input type="text" value="125.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | <input type="text" value="225.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Ann Coyne | | Date of Receipt |
| Mailing Address 6974 Hansen Plz., Apt. 4 | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City Omaha | State NE | Zip Code 68106 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3134400 |
| Name of Employer University of Nebraska | | Amount of Each Receipt this Period |
| Occupation Professor | | <input type="text" value="125.00"/> |
| 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="365.00"/> |
| 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 156 OF 2452 |
| | <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. Helen P P. Crafton
 Full Name (Last, First, Middle Initial)
 Mailing Address 3210 Bolgos Cir.
 City Ann Arbor State MI Zip Code 48105
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128133
 Amount of Each Receipt this Period
 100.00

B. Ms. Barbara F. Crandall
 Full Name (Last, First, Middle Initial)
 Mailing Address 429 Ocampo Dr
 City Pacific Palisades State CA Zip Code 90272
 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
 12 / 07 / 2011
Transaction ID : 3123340
 Amount of Each Receipt this Period
 50.00

C. Elizabeth Craven
 Full Name (Last, First, Middle Initial)
 Mailing Address 4112 Powder Mill Rd.
 City Chapel Hill State NC Zip Code 27514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nonprofit Administration Occupation Warner Foundation
 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
 12 / 14 / 2011
Transaction ID : 3127401
 Amount of Each Receipt this Period
 500.00

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 157 OF 2452 |
| | <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. Gwyneth Cravens
Full Name (Last, First, Middle Initial)
Mailing Address 62 Skimhampton Rd
City East Hampton State NY Zip Code 11937
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 **260.00**

Date of Receipt **12 / 11 / 2011**
Transaction ID : 3126014
Amount of Each Receipt this Period **100.00**

B. Ms. Maria Luisa Crawford
Full Name (Last, First, Middle Initial)
Mailing Address 3300 Darby Rd., Apt. C404
City Haverford State PA Zip Code 19041
FEC ID number of contributing federal political committee. **C**
Name of Employer Bryn Mawr College Occupation Professor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **450.00**

Date of Receipt **12 / 16 / 2011**
Transaction ID : 3131424
Amount of Each Receipt this Period **200.00**

C. Robert Creasey
Full Name (Last, First, Middle Initial)
Mailing Address 14 N 22nd
City Denison State IA Zip Code 51442
FEC ID number of contributing federal political committee. **C**
Name of Employer WITCC Occupation TEACHER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **12 / 16 / 2011**
Transaction ID : 3130118
Amount of Each Receipt this Period **150.00**

SUBTOTAL of Receipts This Page (optional)..... **360.00**
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 2452 |
| | <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. Geraldine Cristol
Full Name (Last, First, Middle Initial)
Mailing Address 3840 Centenary Avenue

| | | |
|----------------|-------------|-------------------|
| City Dallas | State TX | Zip Code 75225 |
|----------------|-------------|-------------------|

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

| | |
|-------------------------------------|-------------------------|
| Name of Employer Temple Emanu-el | Occupation Archivist |
|-------------------------------------|-------------------------|

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 |
| 12 | / | 09 | / | 2011 |

Transaction ID : 3125760

Amount of Each Receipt this Period
2500.00

B. Mrs. SIDNEY W W Croff
Full Name (Last, First, Middle Initial)
Mailing Address 31 Davis Brook Dr

| | | |
|----------------|-------------|-------------------|
| City Natick | State MA | Zip Code 01760 |
|----------------|-------------|-------------------|

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 ▼
1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3135948

Amount of Each Receipt this Period
1000.00

C. Mrs. Afton E. Crooks
Full Name (Last, First, Middle Initial)
Mailing Address 6232 Manoa St.

| | | |
|-----------------|-------------|-------------------|
| City Oakland | State CA | Zip Code 94618 |
|-----------------|-------------|-------------------|

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 ▼
5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3139229

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: PAGE 159 OF 2452
(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. Jeanne P. Crose
 Full Name (Last, First, Middle Initial)
 Mailing Address 3913 Admirable Drive
 City Rancho Palos Verdes State CA Zip Code 90275
 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 ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129441
 Amount of Each Receipt this Period
 20.00

B. Ms. Areta Crowell
 Full Name (Last, First, Middle Initial)
 Mailing Address 2934 N. Beachwood Dr.
 City Los Angeles State CA Zip Code 90068
 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 ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128510
 Amount of Each Receipt this Period
 1000.00

C. Ms. Sheila C. Crowell
 Full Name (Last, First, Middle Initial)
 Mailing Address 376 North Fullerton Ave
 City Montclair State NJ Zip Code 07043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self employed Occupation writer/college app p
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2560.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128064
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1040.00
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 160 OF 2452 |
| | <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. Elizabeth Crump | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3121608 |
| Mailing Address 32 Wagon Wheel Dr | | Amount of Each Receipt this Period 200.00 |
| City East Amherst | State NY | Zip Code 14051 |
| 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 ▼ 400.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Allison M Crump | | Date of Receipt 12 / 15 / 2011 Transaction ID : 3129335 |
| Mailing Address 58 Pleasant St | | Amount of Each Receipt this Period 20.00 |
| City Cambridge | State MA | Zip Code 02139 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer TDC | Occupation consultant | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Mr. Pedro M. Cuatrecasas | | Date of Receipt 12 / 10 / 2011 Transaction ID : 3125892 |
| Mailing Address 7912 Entrada De Luz East | | Amount of Each Receipt this Period 100.00 |
| City San Diego | State CA | Zip Code 92127 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer retired | Occupation physician | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2400.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 320.00 |
| 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 2452
(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. Pedro M. Cuatrecasas
 Full Name (Last, First, Middle Initial)
 Mailing Address 7912 Entrada De Luz East
 City San Diego State CA Zip Code 92127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : 3134271
 Amount of Each Receipt this Period
 100.00

B. Ms. M. Jane Cunnien
 Full Name (Last, First, Middle Initial)
 Mailing Address 1190 Keystone Ave.
 City Reno State NV Zip Code 89503
 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 ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133406
 Amount of Each Receipt this Period
 35.00

c. Mrs. Harry Curlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 1714 Shoreham Dr
 City Montgomery State AL Zip Code 36106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Homemaker
 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
 12 / 22 / 2011
Transaction ID : 3134103
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
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 2452 |
| | <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 Currie

Mailing Address 4800 Fillmore Avenue Apt. 544

| | | |
|--------------------|-------------|-------------------|
| City Alexandria | State VA | Zip Code 22311 |
|--------------------|-------------|-------------------|

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 ▼
290.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 14 | / | 2011 |

Transaction ID : 3128054

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
B. Mr. John Currie

Mailing Address PO Box 11390

| | | |
|------------------|-------------|-------------------|
| City Columbia | State SC | Zip Code 29211 |
|------------------|-------------|-------------------|

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 ▼
600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 29 | / | 2011 |

Transaction ID : 3135268

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. Dr. Kay Curry

Mailing Address 150 Lansdale Avenue

| | | |
|-----------------------|-------------|-------------------|
| City San Francisco | State CA | Zip Code 94127 |
|-----------------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3130123

Amount of Each Receipt this Period
250.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 560.00 |
| 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 163 OF 2452 |
| | <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

A. Ms. Marcia Curtis
Full Name (Last, First, Middle Initial)
Mailing Address 455 Montague Road

| | | |
|--------------------|-------------|-------------------|
| City Sunderland | State MA | Zip Code 01375 |
|--------------------|-------------|-------------------|

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

| | |
|-----------------------------------|-------------------------------|
| Name of Employer UMass Amherst | Occupation Teacher/Retired |
|-----------------------------------|-------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
720.12

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 13 | / | 2011 |

Transaction ID : 3126387

Amount of Each Receipt this Period
150.00

B. Mr. Charles E. Dale
Full Name (Last, First, Middle Initial)
Mailing Address 8108 Corte Del Viento NW

| | | |
|---------------------|-------------|-------------------|
| City Albuquerque | State NM | Zip Code 87120 |
|---------------------|-------------|-------------------|

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 ▼
425.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 14 | / | 2011 |

Transaction ID : 3127416

Amount of Each Receipt this Period
100.00

C. Ms. Mary Daly Lewis
Full Name (Last, First, Middle Initial)
Mailing Address 447 Marengo Avenu Apt. 1

| | | |
|---------------------|-------------|-------------------|
| City Forest Park | State IL | Zip Code 60130 |
|---------------------|-------------|-------------------|

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

| | |
|---------------------------------------|---------------------------------|
| Name of Employer retired professor | Occupation Retired Professor |
|---------------------------------------|---------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
233.20

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 11 | / | 2011 |

Transaction ID : 3125849

Amount of Each Receipt this Period
25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 275.00 |
| 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 2452 |
| | <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. Arlene K. Daniels
Full Name (Last, First, Middle Initial)
Mailing Address 2235 Sacramento St # 31

| | | |
|------------------|-------------|-------------------|
| City Berkeley | State CA | Zip Code 94702 |
|------------------|-------------|-------------------|

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 ▼
285.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 11 | / | 2011 |

Transaction ID : 3125754

Amount of Each Receipt this Period
20.00

B. Ms. Ruth R. Daniels
Full Name (Last, First, Middle Initial)
Mailing Address 28404 Emerald Drive

| | | |
|--------------------|-------------|-------------------|
| City Gold Beach | State OR | Zip Code 97444 |
|--------------------|-------------|-------------------|

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 ▼
600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128766

Amount of Each Receipt this Period
50.00

C. Mr. Troy E. Daniels
Full Name (Last, First, Middle Initial)
Mailing Address 17 Alcott St

| | | |
|-----------------|-------------|-------------------|
| City Allston | State MA | Zip Code 02134 |
|-----------------|-------------|-------------------|

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

| | |
|---------------------------------------|---------------------------------|
| Name of Employer BAE Systems, Inc. | Occupation Software Engineer |
|---------------------------------------|---------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 06 | / | 2011 |

Transaction ID : 3122248

Amount of Each Receipt this Period
40.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 110.00 |
| 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 2452 |
| | <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

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Ms. Barbara Danielson | | Date of Receipt |
| Mailing Address P.O. Box 524 | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Northeast Harbor | ME | 04662 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| Miami Corporation | Finance | |
| 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"/> | |
| | | Transaction ID : 3134460 |
| | | Amount of Each Receipt this Period |
| | | <input type="text" value="1000.00"/> |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Blythe Danner | | Date of Receipt |
| Mailing Address 1915 Grant Avenue Unit C Unit P | | <input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Redondo Beach | CA | 90278 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| Self-Employed | Actor | |
| 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"/> | |
| | | Transaction ID : 3121146 |
| | | Amount of Each Receipt this Period |
| | | <input type="text" value="500.00"/> |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Katharine Darlington | | Date of Receipt |
| Mailing Address 15510 Triple Creek | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| San Antonio | TX | 78247 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| n/a | retired | |
| 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"/> | |
| | | Transaction ID : 3128294 |
| | | Amount of Each Receipt this Period |
| | | <input type="text" value="150.00"/> |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="1650.00"/> |
| 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 166 OF 2452 |
| | <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. Daria L. Darnell
Full Name (Last, First, Middle Initial)
Mailing Address PSC 94 Box 677

| | | |
|-------------|-------------|-------------------|
| City APO | State AE | Zip Code 09824 |
|-------------|-------------|-------------------|

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

| | |
|--|---------------------------------------|
| Name of Employer US Department of State | Occupation Foreign Service Officer |
|--|---------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 22 | / | 2011 |

Transaction ID : 3134161

Amount of Each Receipt this Period

| |
|-------|
| 20.00 |
|-------|

B. Mr. Louis Markham Markham Dauner
Full Name (Last, First, Middle Initial)
Mailing Address 1204 Herschel Woods Lane

| | | |
|--------------------|-------------|-------------------|
| City Cincinnati | State OH | Zip Code 45208 |
|--------------------|-------------|-------------------|

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

| | |
|--|-----------------------|
| Name of Employer St. Ursula Academy | Occupation Teacher |
|--|-----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128849

Amount of Each Receipt this Period

| |
|-------|
| 20.00 |
|-------|

C. Mr. Gary David
Full Name (Last, First, Middle Initial)
Mailing Address 9477 Poole St

| | | |
|------------------|-------------|-------------------|
| City La Jolla | State CA | Zip Code 92037 |
|------------------|-------------|-------------------|

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

| | |
|--|--------------------------|
| Name of Employer Impart Enterprises | Occupation Consultant |
|--|--------------------------|

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 |
| 12 | / | 05 | / | 2011 |

Transaction ID : 3121625

Amount of Each Receipt this Period

| |
|--------|
| 250.00 |
|--------|

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 290.00 |
| 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 2452 |
| | <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. Mrs. Sheila K Davidson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2150 Mission Ridge Road
 City Santa Barbara State CA Zip Code 92103
 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 ▼ 1020.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131025
 Amount of Each Receipt this Period
 85.00

B. Ms. Alice M. Davies
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 Chester Street Apt. 50
 City Birmingham State MI Zip Code 48009
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2011
Transaction ID : 3119928
 Amount of Each Receipt this Period
 15.00

C. Ms. Norma Davis
 Full Name (Last, First, Middle Initial)
 Mailing Address 1308 Lasuen Drive
 City Millbrae State CA Zip Code 94030
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3139064
 Amount of Each Receipt this Period
 40.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 140.00 |
| 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 2452 |
| | <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. Suzanne Davis
Full Name (Last, First, Middle Initial)
Mailing Address 9203 Cranfield Ln
City Charlotte State NC Zip Code 28277
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 ▼ 550.00

Date of Receipt
12 / 22 / 2011
Transaction ID : 3134096
Amount of Each Receipt this Period
50.00

B. Ms. Denise Davis
Full Name (Last, First, Middle Initial)
Mailing Address 2419 Kentucky Ave
City Baltimore State MD Zip Code 21213
FEC ID number of contributing federal political committee. **C**
Name of Employer Cecil County Public Library Occupation Library Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt
12 / 20 / 2011
Transaction ID : 3133214
Amount of Each Receipt this Period
50.00

C. Mr. Rich Davis
Full Name (Last, First, Middle Initial)
Mailing Address 1 West Mason Avenue Suite 300
City Alexandria State VA Zip Code 22301
FEC ID number of contributing federal political committee. **C**
Name of Employer Dixon/Davis Media Group, LLC Occupation media consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123438
Amount of Each Receipt this Period
2000.00

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 169 OF 2452 |
| | <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. Beverly D. Davis
Full Name (Last, First, Middle Initial)
Mailing Address 1111 Turtle Creek Dr., Apt. B
City Greenville State NC Zip Code 27858
FEC ID number of contributing federal political committee. **C**
Name of Employer Indian River Memorial Ho Occupation RN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
12 / 16 / 2011
Transaction ID : 3131490
Amount of Each Receipt this Period
125.00

B. Ms. Doralene Davis
Full Name (Last, First, Middle Initial)
Mailing Address 1680 Beaver Hollow Road
City Norristown State PA Zip Code 19403
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation musician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
12 / 18 / 2011
Transaction ID : 3131015
Amount of Each Receipt this Period
100.00

C. Ms. Karen Davis
Full Name (Last, First, Middle Initial)
Mailing Address 3575-603 Ft Meade Rd
City Laurel State MD Zip Code 20724
FEC ID number of contributing federal political committee. **C**
Name of Employer US Dept of Defense Occupation instructor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
12 / 18 / 2011
Transaction ID : 3130132
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 245.00
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 2452 |
| | <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. Mrs. Jeannine Davis-Kimball
 Full Name (Last, First, Middle Initial)
 Mailing Address 2158 Palomar Ave
 City State Zip Code
 Ventura CA 93001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self archaeologist (retir
 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
 12 / 03 / 2011
Transaction ID : 3119874
 Amount of Each Receipt this Period
 35.00

B. Ms. Milly L Dawson
 Full Name (Last, First, Middle Initial)
 Mailing Address 808 Brightwater circle
 City State Zip Code
 Maitland FL 32751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self writer
 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
 12 / 20 / 2011
Transaction ID : 3133173
 Amount of Each Receipt this Period
 25.00

C. Mrs. JoAnne V. Day
 Full Name (Last, First, Middle Initial)
 Mailing Address 236 Loch Rd
 City State Zip Code
 Columbia SC 29210
 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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133163
 Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 160.00 |
| 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 2452 |
| | (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

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Ms. Rosemarie W W. Day | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 33 Grant Street | | Transaction ID : 3128744 |
| City Somerville | State MA | Zip Code 02145 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 20.00 | |
| Name of Employer Day Health Strategies | Occupation Consultant | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Ms. Joan Blieve Dayton | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 09 / 2011 |
| Mailing Address 4285 Maryland St. | | Transaction ID : 3125199 |
| City San Diego | State CA | Zip Code 92103 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 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 ▼ 250.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Mr. Carl de Boor | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2011 |
| Mailing Address pob 1076 | | Transaction ID : 3130935 |
| City Eastsound | State WA | Zip Code 98245 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 400.00 | |
| Name of Employer retired | Occupation Mathematician | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1200.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 670.00 |
| 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 172 OF 2452 |
| | (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. Joanne De Paola
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 447

| | | |
|---|-------------------------------------|-------------------|
| City Mahopac Falls | State NY | Zip Code 10542 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self | Occupation Psychotherapist | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1500.00 | |

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 06 / 2011
Transaction ID : 3122796

Amount of Each Receipt this Period
500.00

B. Ms. Jacomina P. De Regt
Full Name (Last, First, Middle Initial)
Mailing Address 519 N Norwood St

| | | |
|---|---------------------------------------|-------------------|
| City Arlington | State VA | Zip Code 22203 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer World Bank | Occupation Sr. Client Con. Officer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 15 / 2011
Transaction ID : 3128605

Amount of Each Receipt this Period
20.00

C. Mrs. Sally Graves De Witt
Full Name (Last, First, Middle Initial)
Mailing Address Box 80010

| | | |
|---|-------------------------------------|-------------------|
| City San Marino | State CA | Zip Code 91118 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1300.00 | |

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 20 / 2011
Transaction ID : 3133164

Amount of Each Receipt this Period
250.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 770.00 |
| 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 2452
(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. Minnie Dean

Mailing Address 112 2nd Street

City Radford State VA Zip Code 24141

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 ▼
1020.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2011

Transaction ID : 3130947

Amount of Each Receipt this Period
85.00

Full Name (Last, First, Middle Initial)
B. Dr. Kay Deaux

Mailing Address 20 E 9TH St., Apt. 20E
Apt 20E

City New York State NY Zip Code 10003

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

Name of Employer Retired Occupation retired professor

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
12 / 19 / 2011

Transaction ID : 3131870

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Ms. Helen Debardeleben

Mailing Address 6209 Mineral Point Road
Apt. 620

City Madison State WI Zip Code 53705

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 ▼
275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2011

Transaction ID : 3119910

Amount of Each Receipt this Period
15.00

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 174 OF 2452
(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. Erika Debronac

Mailing Address 900 East Meridian
ste 19-103

City Milton State WA Zip Code 98354

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 ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2011
Transaction ID : 3131134

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Ms. Becky DeBus

Mailing Address 8389 Pleasant View Drive

City Mounds View State MN Zip Code 55112

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 ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128804

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Ms. Jane S S. DeHart

Mailing Address 130 Camino Alto

City Santa Barbara State CA Zip Code 93103

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

Name of Employer University of California Occupation University Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128604

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

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 175 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Charlene G. Delaney
 Full Name (Last, First, Middle Initial)
 Mailing Address 1483 Sutter, Unit #404
 City San Francisco State CA Zip Code 94109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Keller Williams Realty Occupation Realtor
 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
 12 / 17 / 2011
Transaction ID : 3130136
 Amount of Each Receipt this Period
 250.00

B. Ms. Linda W. Delap
 Full Name (Last, First, Middle Initial)
 Mailing Address 46 Sun Valley Way
 City Morris Plains State NJ Zip Code 7950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PharmaWin LLC Occupation MEDICAL WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133517
 Amount of Each Receipt this Period
 115.00

C. Ms. Ella Deleon
 Full Name (Last, First, Middle Initial)
 Mailing Address 3251 LONGHORN RIDGE ROAD
 City Cameron Park State CA Zip Code 95682
 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 ▼ 725.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3139132
 Amount of Each Receipt this Period
 35.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 175.00 |
| 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 176 OF 2452 |
| | <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. Ross Delston
Full Name (Last, First, Middle Initial)

Mailing Address 3013 Beech Street NW

City Washington State DC Zip Code 20015

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

Name of Employer Self Occupation Attorney at Law

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
 12 / 20 / 2011

Transaction ID : 3132682

Amount of Each Receipt this Period
 50.00

B. Mr. Janet Dembinsky
Full Name (Last, First, Middle Initial)

Mailing Address 1104 Valley View Road

City Glenwood Springs State CO Zip Code 81601

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 ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2011

Transaction ID : 3138386

Amount of Each Receipt this Period
 20.00

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

Mailing Address 822 Via Alhambra Unit N

City Laguna Woods State CA Zip Code 92637

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 ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011

Transaction ID : 3124931

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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 2452 |
| | (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. Jeanine Dendy
Full Name (Last, First, Middle Initial)
Mailing Address 2329 Hill Street
City Alexandria State LA Zip Code 71301
FEC ID number of contributing federal political committee. **C**
Name of Employer U.S. MS Occupation Administrative Assistant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3128835
Amount of Each Receipt this Period
300.00

B. Lori Denham
Full Name (Last, First, Middle Initial)
Mailing Address 5714 MacArthur Blvd, NW
City Washington State DC Zip Code 20016
FEC ID number of contributing federal political committee. **C**
Name of Employer Kountoupes Consulting Occupation Lobbyist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3132324
Amount of Each Receipt this Period
500.00

C. Mr. Walter E. Denley
Full Name (Last, First, Middle Initial)
Mailing Address 2546 Oakwood Trace
City Smyrna State GA Zip Code 30080
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 ▼ 260.00

Date of Receipt
12 / 04 / 2011
Transaction ID : 3119909
Amount of Each Receipt this Period
20.00

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|--|--------|
| 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 178 OF 2452 |
| | <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. Ken Denson
Full Name (Last, First, Middle Initial)

Mailing Address 543 Westernmill Dr.

City Chesterfield State MO Zip Code 63017

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

Name of Employer SAVVIS, Inc. Occupation Network Engineer

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
 12 / 11 / 2011

Transaction ID : 3125554

Amount of Each Receipt this Period
25.00

B. Ms. Christine Denton
Full Name (Last, First, Middle Initial)

Mailing Address 1945 W Bunk House Dr.

City Jackson State WY Zip Code 83001

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 ▼ **1650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011

Transaction ID : 3134603

Amount of Each Receipt this Period
750.00

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

Mailing Address 1637 Fairorchard Av

City San Jose State CA Zip Code 95125

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

Name of Employer LitePoint Corp Occupation Engineer

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
 12 / 29 / 2011

Transaction ID : 3137819

Amount of Each Receipt this Period
300.00

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1075.00 |
| 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 179 OF 2452 |
| | <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. Bill DePuy
Full Name (Last, First, Middle Initial)
Mailing Address 32 Alexander Street
City Alexandria State VA Zip Code 22314
FEC ID number of contributing federal political committee. **C**
Name of Employer The SeaMarsh Group, Inc. Occupation President
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **12 / 08 / 2011**
Transaction ID : 3124178
Amount of Each Receipt this Period **500.00**

B. Lisa Dercks
Full Name (Last, First, Middle Initial)
Mailing Address 5523 Village Dr
City Edina State MN Zip Code 55439
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation disabled
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **290.00**

Date of Receipt **12 / 26 / 2011**
Transaction ID : 3135880
Amount of Each Receipt this Period **30.00**

c. Ms. Kathryn Dernham
Full Name (Last, First, Middle Initial)
Mailing Address 1030 Hollywood Ave
City Oakland State CA Zip Code 94602
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation paralegal
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **360.00**

Date of Receipt **12 / 08 / 2011**
Transaction ID : 3124188
Amount of Each Receipt this Period **30.00**

SUBTOTAL of Receipts This Page (optional)..... **560.00**
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 180 OF 2452 |
| | <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. Anne Dethrow | | Date of Receipt 12 / 09 / 2011 Transaction ID : 3125555 |
| Mailing Address 11207 Shelterwood Ln | | Amount of Each Receipt this Period 500.00 |
| City Dallas | State TX | Zip Code 75229 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self | Occupation Retail Sales | |
| 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. Ms. Mary Dettling-Wright | | Date of Receipt 12 / 19 / 2011 Transaction ID : 3131970 |
| Mailing Address 31 River Ct., Apt. 3305 | | Amount of Each Receipt this Period 125.00 |
| City Jersey City | State NJ | Zip Code 07310 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Robert F. Wright Associates, Inc. | Occupation Secretary/Treasurer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Ileen Devault | | Date of Receipt 12 / 27 / 2011 Transaction ID : 3134682 |
| Mailing Address 1404 Hanshaw Rd | | Amount of Each Receipt this Period 50.00 |
| City Ithaca | State NY | Zip Code 14850 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Cornell University | Occupation Professor | |
| 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).....▶ | 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: PAGE 181 OF 2452
(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. Bonnie Devine
 Full Name (Last, First, Middle Initial)
 Mailing Address 1920 Lawrence Road
 City State Zip Code
 Haverton PA 19083
 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 ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128910
 Amount of Each Receipt this Period
 20.00

B. Mrs. Aashish D. Devitre
 Full Name (Last, First, Middle Initial)
 Mailing Address 211 Central Park W # 10G
 City State Zip Code
 New York NY 10024
 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 ▼
 431.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132031
 Amount of Each Receipt this Period
 150.00

C. Ms. Maureen Dewan
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Oxbow Road
 City State Zip Code
 Westport CT 06880
 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 ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129215
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00
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 2452 |
| | <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. Barbara Di Ferrante | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 21 / 2011 |
| Mailing Address 3102 W Laurelhurst Dr NE | | Transaction ID : 3133812 |
| City Seattle | State WA | Zip Code 98105 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 250.00 | |
| Name of Employer Bellevue Arts Museum | Occupation retail buyer | |
| 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. Miss Ann Diamond | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address 588 W End Ave. | | Transaction ID : 3134572 |
| City New York | State NY | Zip Code 10024 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 265.00 | |
| Name of Employer Broustein, VanVern | Occupation Lawyer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 265.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Ms. Katherine Diamond | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 18 / 2011 |
| Mailing Address 4208 51st Ave. S. | | Transaction ID : 3131187 |
| City Seattle | State WA | Zip Code 98118 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 15.00 | |
| Name of Employer Self | Occupation Graphic Designer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | |

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 530.00 |
| 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 183 OF 2452 |
| | <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. RITA VICTORIA Victoria Diaz-Kenney | | Date of Receipt |
| Mailing Address 15437 DEER PATH DR. | | <input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Brooksville | FL | 34604 |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | Occupation | Transaction ID : 3126094 |
| n/a | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="220.00"/> | <input type="text" value="10.00"/> |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. RITA VICTORIA Victoria Diaz-Kenney | | Date of Receipt |
| Mailing Address 15437 DEER PATH DR. | | <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Brooksville | FL | 34604 |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | Occupation | Transaction ID : 3133296 |
| n/a | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="220.00"/> | <input type="text" value="75.00"/> |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Kathy W Dibiase | | Date of Receipt |
| Mailing Address 1600 Blackburn Heights Drive | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Sewickley | PA | 15143 |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> |
| Name of Employer | Occupation | Transaction ID : 3128867 |
| self | House Manager | |
| Receipt For: | Aggregate Year-to-Date ▼ | Amount of Each Receipt this Period |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="240.00"/> | <input type="text" value="20.00"/> |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|---|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional)..... | <input type="text" value="105.00"/> |
| 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 184 OF 2452 |
| | <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. Daryl Dichek
Full Name (Last, First, Middle Initial)

Mailing Address 101 Amigo RD

City Soquel State CA Zip Code 95073

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

Name of Employer Women's Health Center Occupation Health Educator

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
 12 / 27 / 2011

Transaction ID : 3134611

Amount of Each Receipt this Period
 500.00

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

Mailing Address 145 Central Park West

City New York State NY Zip Code 10023

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

Name of Employer self Occupation concert pianist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011

Transaction ID : 3126216

Amount of Each Receipt this Period
 20.00

C. Ms. Barbara Dicicco-Bloom
Full Name (Last, First, Middle Initial)

Mailing Address 3 Woodmeadow Ln.

City Princeton Junction State NJ Zip Code 08550

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

Name of Employer City University of New York Occupation Nurse Professor

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
 12 / 14 / 2011

Transaction ID : 3127429

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 570.00

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 185 OF 2452 |
| | <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. Ruth Dickler
Full Name (Last, First, Middle Initial)

Mailing Address 120 E 81st St Apt 12C

City New York State NY Zip Code 10028

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
 12 / 27 / 2011

Transaction ID : 3134426

Amount of Each Receipt this Period
 250.00

B. Dr. Dennis W. Dickson
Full Name (Last, First, Middle Initial)

Mailing Address 13919 Shipwreck Cir N

City Jacksonville State FL Zip Code 32224

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

Name of Employer Mayo Clinic Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : 3139144

Amount of Each Receipt this Period
 250.00

C. Ms. Margaret J. DiClemente
Full Name (Last, First, Middle Initial)

Mailing Address 15357 Mutiny Ct.

City Corpus Christi State TX Zip Code 78418

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 ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011

Transaction ID : 3134640

Amount of Each Receipt this Period
 55.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 555.00 |
| 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 186 OF 2452 |
| | <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 Dieterich
Full Name (Last, First, Middle Initial)

Mailing Address 5201 S. Cornell Ave. #21C
Apt. 21-C

City Chicago State IL Zip Code 60615

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 ▼
225.00

Date of Receipt
12 / 14 / 2011
Transaction ID : 3127431

Amount of Each Receipt this Period
100.00

B. Ms. Katharine R R. Digby
Full Name (Last, First, Middle Initial)

Mailing Address 16919 SE Foster Road

City Portland State OR Zip Code 97236

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 ▼
240.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129211

Amount of Each Receipt this Period
20.00

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

Mailing Address 16919 SE Foster Rd

City Gresham State OR Zip Code 97080

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 ▼
270.00

Date of Receipt
12 / 28 / 2011
Transaction ID : 3137710

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00

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 187 OF 2452 |
| | <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. Catherine K. Dillingham
Full Name (Last, First, Middle Initial)

Mailing Address 379A Piute Ln.

City Stratford State CT Zip Code 06614

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

Name of Employer Fairfield University Occupation Adjunct Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011

Transaction ID : 3134061

Amount of Each Receipt this Period
100.00

B. Ms. Gloria Dillon
Full Name (Last, First, Middle Initial)

Mailing Address 11000 Glueck Lane

City Kensington State MD Zip Code 20895

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 ▼ **275.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129468

Amount of Each Receipt this Period
25.00

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

Mailing Address 6906 Pershing Ave.

City Saint Louis State MO Zip Code 63130

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

Name of Employer Indiana University Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **670.12**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011

Transaction ID : 3134415

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **375.00**

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 188 OF 2452 |
| | <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. James A. Dingus
Full Name (Last, First, Middle Initial)

Mailing Address 20600 Chagrin Blvd., Ste. 701

| | | |
|-------------------|-------------|-------------------|
| City Beachwood | State OH | Zip Code 44122 |
|-------------------|-------------|-------------------|

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 ▼
206.70

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3131499

Amount of Each Receipt this Period
53.54

B. Ms. Cynthia C DiVitto
Full Name (Last, First, Middle Initial)

Mailing Address 379 Overlook Drive

| | | |
|--------------------|-------------|-------------------|
| City Waterville | State OH | Zip Code 43566 |
|--------------------|-------------|-------------------|

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

| | |
|-----------------------------------|------------------------------------|
| Name of Employer HCR Manorcare | Occupation Occupational therapi |
|-----------------------------------|------------------------------------|

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128750

Amount of Each Receipt this Period
50.00

C. Ms. Christina Dodds
Full Name (Last, First, Middle Initial)

Mailing Address 2506 Hillview Rd

| | | |
|----------------|-------------|-------------------|
| City Austin | State TX | Zip Code 78703 |
|----------------|-------------|-------------------|

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 |
| 12 | / | 14 | / | 2011 |

Transaction ID : 3127240

Amount of Each Receipt this Period
250.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 353.54 |
| TOTAL This Period (last page this line 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 189 OF 2452 |
| | <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. Dorothy J. Dodson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3400 Wagner Heights Rd
 Apt. 325
 City Stockton State CA Zip Code 95209
 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 ▼ 345.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2011
Transaction ID : 3126047
 Amount of Each Receipt this Period
 35.00

B. Ms. Frances J. Doherty
 Full Name (Last, First, Middle Initial)
 Mailing Address 855 N Park Rd., Apt. BB103
 Apt BB 103
 City Reading State PA Zip Code 19610
 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
 12 / 27 / 2011
Transaction ID : 3134618
 Amount of Each Receipt this Period
 100.00

C. Ms. Lisa Dolin
 Full Name (Last, First, Middle Initial)
 Mailing Address 2681 Bexley Park Road
 City Columbus State OH Zip Code 43209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self employed Occupation Management Consultan
 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
 12 / 13 / 2011
Transaction ID : 3126234
 Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 235.00 |
| 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 190 OF 2452
(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 Domigan
 Full Name (Last, First, Middle Initial)
 Mailing Address 177 Hillside Ave
 City Chatham State NJ Zip Code 07928
 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 ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : 3123690
 Amount of Each Receipt this Period
 10.00

B. George Donaldson
 Full Name (Last, First, Middle Initial)
 Mailing Address 453 Boynton Ave
 City Berkeley State CA Zip Code 94707
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3121840
 Amount of Each Receipt this Period
 100.00

C. Dr. Jane A. Donohue
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Barry RD
 City Lambertville State NJ Zip Code 08530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Consumer Health Services Occupation Executive
 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
 12 / 05 / 2011
Transaction ID : 3121604
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 610.00
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 191 OF 2452
(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. Kimberly Dorgan

Mailing Address 1702 Esquire Lane

City State Zip Code
McLean VA 22101

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

Name of Employer Occupation
American Council of Life Insurers Trade association ex

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
12 / 12 / 2011
Transaction ID : 3126113

Amount of Each Receipt this Period
1000.00

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

Mailing Address 6742 Angus Drive

City State Zip Code
La Verne CA 91750

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

Name of Employer Occupation
IBM Project manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 14 / 2011
Transaction ID : 3127439

Amount of Each Receipt this Period
50.00

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

Mailing Address 231 Durose Ter

City State Zip Code
Madison WI 53705

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 ▼
325.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 29 / 2011
Transaction ID : 3135256

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1075.00

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 2452 |
| | <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 J Dougherty
 Full Name (Last, First, Middle Initial)
 Mailing Address 4221 N. Kenmore Ave
 City Chicago State IL Zip Code 60613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Therapist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128070
 Amount of Each Receipt this Period
 100.00

B. Mrs. Ashton S. Douglass
 Full Name (Last, First, Middle Initial)
 Mailing Address 1225 independence Ave SE
 City Washington State DC Zip Code 20003
 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 M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129083
 Amount of Each Receipt this Period
 100.00

C. Ms. Mary Lou Dove
 Full Name (Last, First, Middle Initial)
 Mailing Address 639 Oak Ridge Drive
 City Neosho State MO Zip Code 64850
 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 ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129460
 Amount of Each Receipt this Period
 10.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 210.00 |
| 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 193 OF 2452 |
| | <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. Elizabeth Downing
Full Name (Last, First, Middle Initial)
Mailing Address 6708 The Masters Ave
City Lakewood Ranch State FL Zip Code 34202
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-employed Occupation Instructor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **240.00**

Date of Receipt **12 / 10 / 2011**
Transaction ID : 3126065
Amount of Each Receipt this Period **200.00**

B. Ms. Elizabeth Downing
Full Name (Last, First, Middle Initial)
Mailing Address 6708 The Masters Ave
City Lakewood Ranch State FL Zip Code 34202
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-employed Occupation Instructor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **240.00**

Date of Receipt **12 / 24 / 2011**
Transaction ID : 3135744
Amount of Each Receipt this Period **25.00**

C. Mrs. Janice Doxtator
Full Name (Last, First, Middle Initial)
Mailing Address 1909 Plover St.
City Stevens Point State WI Zip Code 54481
FEC ID number of contributing federal political committee. **C**
Name of Employer Portage Co. Pub. Library Occupation Librarian
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **325.00**

Date of Receipt **12 / 19 / 2011**
Transaction ID : 3131900
Amount of Each Receipt this Period **125.00**

SUBTOTAL of Receipts This Page (optional)..... **170.00**
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 194 OF 2452 |
| | (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. Mary E Doyle
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Bear Gulch Road

City Woodside State CA Zip Code 94062

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

Name of Employer Palm, Inc. Occupation Executive, General C

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
 12 / 29 / 2011

Transaction ID : 3138158

Amount of Each Receipt this Period
50.00

B. Ms. Diane Drayson
Full Name (Last, First, Middle Initial)

Mailing Address 3750 Tremont Lane

City Ann Arbor State MI Zip Code 48105

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 ▼ **1030.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011

Transaction ID : 3128046

Amount of Each Receipt this Period
20.00

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

Mailing Address Po Box 1253

City Wellfleet State MA Zip Code 02667

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 ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011

Transaction ID : 3121909

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... **320.00**

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 195 OF 2452 |
| | <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. Barbara L. Drinkwater
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 743

City Vashon State WA Zip Code 98070

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

Name of Employer Retired Occupation Exercise physiologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3128734

Amount of Each Receipt this Period
200.00

B. Mr. Alfred T. Driscoll
Full Name (Last, First, Middle Initial)

Mailing Address 222 Eastbourne Ter.

City Moorestown State NJ Zip Code 8057

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 ▼ **412.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011

Transaction ID : 3133637

Amount of Each Receipt this Period
100.00

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

Mailing Address 1620 Lombardi Road

City Mount Shasta State CA Zip Code 96067

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

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011

Transaction ID : 3130852

Amount of Each Receipt this Period
500.00

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 620.00 |
| 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 196 OF 2452 |
| | <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. Jayne Dunham | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2011 |
| Mailing Address 1318 Mission East Dr | | Transaction ID : 3131049 |
| City Niles | State MI | Zip Code 49120 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| 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 ▼ 400.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Jody Dunitz | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 15225 Sutton St | | Transaction ID : 3127444 |
| City Sherman Oaks | State CA | Zip Code 91403 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer self | Occupation consultant | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 325.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Mary F. Mimi Dunn | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 117-5 Sheridan St | | Transaction ID : 3128059 |
| City Portland | State ME | Zip Code 04101 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer ret | Occupation ret | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 325.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 225.00 |
| 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 2452 |
| | <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 self employed | Occupation Interior Designer |
|-----------------------------------|---------------------------------|

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 |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3134450

Amount of Each Receipt this Period
1000.00

B. Ms. Ann C. Dunnington
Full Name (Last, First, Middle Initial)
Mailing Address Po Box 523

| | | |
|------------------|-------------|-------------------|
| City Solomons | State MD | Zip Code 20688 |
|------------------|-------------|-------------------|

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

| | |
|-------------------------------|-----------------------------------|
| Name of Employer REQUESTED | Occupation retired federal emp |
|-------------------------------|-----------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3131454

Amount of Each Receipt this Period
115.00

C. Ms. Mary H. DuPree
Full Name (Last, First, Middle Initial)
Mailing Address 320 N Adams St.

| | | |
|----------------|-------------|-------------------|
| City Moscow | State ID | Zip Code 83843 |
|----------------|-------------|-------------------|

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

| | |
|---|-------------------------|
| Name of Employer University of Idaho | Occupation Professor |
|---|-------------------------|

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 |
| 12 | / | 19 | / | 2011 |

Transaction ID : 3131831

Amount of Each Receipt this Period
250.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1365.00 |
| 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 198 OF 2452 |
| | (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. Dianne V. Durrwachter | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2011 |
| Mailing Address 809 West 5th St | | Transaction ID : 3137830 |
| City Port Angeles | State WA | Zip Code 98363 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50.00 | |
| Name of Employer none | Occupation Retired Teacher | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 650.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Ms. Margaret P. Dwyer | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2011 |
| Mailing Address 1550 El Camino Real, Apt. 309 | | Transaction ID : 3135128 |
| City Lady Lake | State FL | Zip Code 32159 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 140.00 | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 565.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Ms. Betty C. Dyck | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 160 Ely Pl. | | Transaction ID : 3132030 |
| City Palo Alto | State CA | Zip Code 94306 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 125.00 | |
| Name of Employer n/a | Occupation Retired | |
| 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).....▶ | 315.00 |
| 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 199 OF 2452 |
| | <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. Ellen C. Eagan

Mailing Address 344 Santa Paula Avenue

City Millbrae State CA Zip Code 94030

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

Name of Employer UCSF Medical Center Occupation Blood Banker

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
 12 / 26 / 2011

Transaction ID : 3135823

Amount of Each Receipt this Period
250.00

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

Mailing Address 21908 36th Ave W

City Brier State WA Zip Code 98036

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 ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011

Transaction ID : 3137838

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Ms. Ruth A. A. Eatock

Mailing Address 11 Rice St.

City Newton Centre State MA Zip Code 02459

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

Name of Employer Massachusetts Eye & Ear Infirmary Occupation Scientist

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
 12 / 31 / 2011

Transaction ID : 3138772

Amount of Each Receipt this Period
250.00

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 325.00 |
| 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 2452
(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. Robert Eberle
 Full Name (Last, First, Middle Initial)
 Mailing Address 8099 Newstead Ln
 City Gloucester State VA Zip Code 23061
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011
Transaction ID : 3133682
 Amount of Each Receipt this Period
 300.00

B. Ms. Carol Kwass Edelstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 11980 San Vicente BLVD Ste 711
 City Los Angeles State CA Zip Code 90049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation M.D.
 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
 12 / 16 / 2011
Transaction ID : 3131407
 Amount of Each Receipt this Period
 250.00

C. Dr. Diane L Edge
 Full Name (Last, First, Middle Initial)
 Mailing Address 1062 myrtle way
 City san diego State CA Zip Code 92103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation DDS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130886
 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 201 OF 2452 |
| | <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. Bert T. Edwards
Full Name (Last, First, Middle Initial)
Mailing Address 3 Briarcliffe Ct.
City Ocean View State DE Zip Code 19970
FEC ID number of contributing federal political committee. **C**
Name of Employer Bert T. Edwards, CPA/CGFM Occupation retired self CPA
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129811
Amount of Each Receipt this Period 150.00

B. Ms. Vivian Edwards
Full Name (Last, First, Middle Initial)
Mailing Address 10206 W. Wadsworth Road
City Beach Park, State IL Zip Code 60099
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Retired Teacher
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 750.00

Date of Receipt 12 / 20 / 2011
Transaction ID : 3133181
Amount of Each Receipt this Period 250.00

C. Ms. Laura B. Edwards
Full Name (Last, First, Middle Initial)
Mailing Address 406 West Patterson Place
City Chapel Hill State NC Zip Code 27516
FEC ID number of contributing federal political committee. **C**
Name of Employer video and film producer Occupation self
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1008.00

Date of Receipt 12 / 16 / 2011
Transaction ID : 3130909
Amount of Each Receipt this Period 84.00

SUBTOTAL of Receipts This Page (optional)..... **484.00**
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 2452 |
| | <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. David Egger | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 25 / 2011 |
| Mailing Address 22 Coniston Court | | Transaction ID : 3135603 |
| City Princeton | State NJ | Zip Code 08540 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 1000.00 | |
| Name of Employer Retired | Occupation Neuroscience | |
| 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. Lynne M Eggers | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 221 Mullen Ave. | | Transaction ID : 3127448 |
| City San Francisco | State CA | Zip Code 94110 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100.00 | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 205.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Ms. Anne H. Ehrlich | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 371 Serra Mall | | Transaction ID : 3132151 |
| City Stanford | State CA | Zip Code 94305 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 75.00 | |
| Name of Employer Stanford University | Occupation SR RESEARCH SCIENTIS | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 425.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1175.00 |
| 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 2452 |
| | <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. Jill Eichhorn
Full Name (Last, First, Middle Initial)

Mailing Address 549 Beechwood Drive

City Clarksville State TN Zip Code 37040

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

Name of Employer Austin Peay State University Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129487

Amount of Each Receipt this Period
 200.00

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

Mailing Address 2261 Summerwind Circle

City Henderson State NV Zip Code 89052

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

Name of Employer not employed Occupation housewife

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
 12 / 18 / 2011

Transaction ID : 3130161

Amount of Each Receipt this Period
 100.00

C. Ms. Robin I. Eisenberg
Full Name (Last, First, Middle Initial)

Mailing Address 8226 Brookside Road

City Elkins Park State PA Zip Code 19027

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

Name of Employer Pearson VUE Occupation Manager, Learning an

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
 12 / 11 / 2011

Transaction ID : 3125802

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00

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 2452 |
| | <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. James Elder
Full Name (Last, First, Middle Initial)

Mailing Address 299 Ashlar Drive

| | | |
|--------------|-------------|-------------------|
| City Napa | State CA | Zip Code 94558 |
|--------------|-------------|-------------------|

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 ▼
240.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128922

Amount of Each Receipt this Period
200.00

B. Ms. Marjorie L Elder
Full Name (Last, First, Middle Initial)

Mailing Address 1181 Cork Road

| | | |
|----------------|-------------|-------------------|
| City Victor | State NY | Zip Code 14564 |
|----------------|-------------|-------------------|

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 ▼
2750.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 14 | / | 2011 |

Transaction ID : 3128095

Amount of Each Receipt this Period
1000.00

C. Ms. Bernice B. Elkin
Full Name (Last, First, Middle Initial)

Mailing Address 3737 Atlantic Ave., Apt. 300

| | | |
|--------------------|-------------|-------------------|
| City Long Beach | State CA | Zip Code 90807 |
|--------------------|-------------|-------------------|

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 ▼
650.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3131561

Amount of Each Receipt this Period
50.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1070.00 |
| 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 2452 |
| | <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. Jeannie Ellington
Full Name (Last, First, Middle Initial)
Mailing Address 135 Beaver Trl
City Athens State GA Zip Code 30605
FEC ID number of contributing federal political committee. **C**
Name of Employer none Occupation homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 221.00

Date of Receipt 12 / 13 / 2011
Transaction ID : 3127042
Amount of Each Receipt this Period 100.00

B. Ms. Jane Ellis
Full Name (Last, First, Middle Initial)
Mailing Address 4562 Alex Drive
City San Jose State CA Zip Code 95130
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 ▼ 300.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129570
Amount of Each Receipt this Period 25.00

C. Ms. Joyce Ellis
Full Name (Last, First, Middle Initial)
Mailing Address 714 23rd Street
City Glenwood Springs State CO Zip Code 81601
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation retired physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 18 / 2011
Transaction ID : 3131116
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 2452 |
| | <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. Elizabeth W. Elmendorf
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 Cross Gates Rd.
 City Madison State NJ Zip Code 07940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation at home
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129792
 Amount of Each Receipt this Period 115.00

B. Dr. Mary Elmendorf
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 John Ringling Blvd., Apt.
 City Sarasota State FL Zip Code 34236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired anthropologist Occupation retired anthropologi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 27 / 2011
Transaction ID : 3134799
 Amount of Each Receipt this Period 100.00

C. Mr. Martin Elvis
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 Linnaean St.
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Smithsonian Institution Occupation astronomer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 12 / 27 / 2011
Transaction ID : 3134541
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 315.00
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 2452 (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. Ms. Antoinette S. Emch | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 Transaction ID : 3135411 | | | | | |
| Mailing Address 621 NE 5th Terrace | Amount of Each Receipt this Period 100.00 | | | | | |
| <table style="width: 100%;"> <tr> <td style="width: 30%;">City</td> <td style="width: 30%;">State</td> <td style="width: 40%;">Zip Code</td> </tr> <tr> <td>Gainesville</td> <td>FL</td> <td>32601</td> </tr> </table> | | City | State | Zip Code | Gainesville | FL |
| City | State | Zip Code | | | | |
| Gainesville | FL | 32601 | | | | |
| FEC ID number of contributing federal political committee. | C | | | | | |
| Name of Employer retired | Occupation historian | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 287.50 | | | | | |

| | | | | | | |
|--|---|----------|-------|----------|---------|----|
| Full Name (Last, First, Middle Initial) B. Mr. David English | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 Transaction ID : 3132162 | | | | | |
| Mailing Address 2596 Leimert Blvd. | Amount of Each Receipt this Period 125.00 | | | | | |
| <table style="width: 100%;"> <tr> <td style="width: 30%;">City</td> <td style="width: 30%;">State</td> <td style="width: 40%;">Zip Code</td> </tr> <tr> <td>Oakland</td> <td>CA</td> <td>94602</td> </tr> </table> | | City | State | Zip Code | Oakland | CA |
| City | State | Zip Code | | | | |
| Oakland | CA | 94602 | | | | |
| 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) C. Ms. Sue Errington | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2011 Transaction ID : 3130876 | | | | | |
| Mailing Address 3200 West Brook Drive | Amount of Each Receipt this Period 85.00 | | | | | |
| <table style="width: 100%;"> <tr> <td style="width: 30%;">City</td> <td style="width: 30%;">State</td> <td style="width: 40%;">Zip Code</td> </tr> <tr> <td>Muncie</td> <td>IN</td> <td>47304</td> </tr> </table> | | City | State | Zip Code | Muncie | IN |
| City | State | Zip Code | | | | |
| Muncie | IN | 47304 | | | | |
| FEC ID number of contributing federal political committee. | C | | | | | |
| Name of Employer n/a | Occupation retired | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1270.00 | | | | | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 310.00 |
| 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 2452 |
| | <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. Marjorie Eskay-Auerbach
 Full Name (Last, First, Middle Initial)
 Mailing Address 2402 E. CERRADA DE PROMESA
 City TUCSON State AZ Zip Code 85718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **387.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126502
 Amount of Each Receipt this Period
25.00

B. Ms. Pamela Esser
 Full Name (Last, First, Middle Initial)
 Mailing Address 5215 Wayfind In
 City Bloomfield State MI Zip Code 48302
 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 **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133227
 Amount of Each Receipt this Period
30.00

C. Ms. Lee Estes
 Full Name (Last, First, Middle Initial)
 Mailing Address 1036 S. Los Robles Avenue
 City Pasadena State CA Zip Code 91106
 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 **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128672
 Amount of Each Receipt this Period
20.00

| | |
|---|--------------|
| SUBTOTAL of Receipts This Page (optional)..... | 75.00 |
| 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 2452 |
| | <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 Estes | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2011 Transaction ID : 3126519 |
| Mailing Address 5315 South Dentwood Drive | | Amount of Each Receipt this Period 500.00 |
| City Dallas | State TX | Zip Code 75220 |
| 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. Ms. Donna Esteves | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 21 / 2011 Transaction ID : 3133691 |
| Mailing Address 77 Yacht Club Dr. | | Amount of Each Receipt this Period 125.00 |
| City Lake Hopatcong | State NJ | Zip Code 7849 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 325.00 | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mr. Richard Estey | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2011 Transaction ID : 3125438 |
| Mailing Address 738 Washington St. | | Amount of Each Receipt this Period 50.00 |
| City Craig | State CO | Zip Code 81625 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer R&L Brosamer | Occupation UNEMPLOYED | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1775.00 | |

| | |
|--|--------|
| 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 210 OF 2452 |
| | <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. Nora Esthimer
Full Name (Last, First, Middle Initial)

Mailing Address 391 Lystra Estates Drive

City Chapel Hill State NC Zip Code 27517

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 ▼
205.00

Date of Receipt
12 / 16 / 2011
Transaction ID : 3131203

Amount of Each Receipt this Period
200.00

B. Ms. Bonnie Ettinger
Full Name (Last, First, Middle Initial)

Mailing Address 18 Hazel Lane

City Springfield State IL Zip Code 62712

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 ▼
300.00

Date of Receipt
12 / 30 / 2011
Transaction ID : 3138393

Amount of Each Receipt this Period
100.00

C. Ms. Deborah Anne Etzel
Full Name (Last, First, Middle Initial)

Mailing Address 31 Island Rock

City Plymouth State MA Zip Code 02360

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

Name of Employer none Occupation homemaker/volunteer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
12 / 16 / 2011
Transaction ID : 3130173

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00

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 211 OF 2452 |
| | <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. Marta Evans | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 855 Kenton Rd. | | Transaction ID : 3132085 |
| City Deerfield | State IL | Zip Code 60015 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 |
| Name of Employer n/a | Occupation retired | |
| 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) B. Ms. Nancy Evans Evans | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 1508 E El Alameda | | Transaction ID : 3128078 |
| City Palm Springs | State CA | Zip Code 92262 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| Name of Employer n/a | Occupation Retired | |
| 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. Joanne Evans | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 823 Country Club Crt | | Transaction ID : 3128112 |
| City Sonoma | State CA | Zip Code 95476 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Self employed | Occupation Business owner | |
| 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).....▶ | 325.00 |
| 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 212 OF 2452 |
| | <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. Juanita Everson
Full Name (Last, First, Middle Initial)
Mailing Address 12437 Gilmore Ave.
City Los Angeles State CA Zip Code 90066
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 ▼ 210.00

Date of Receipt
12 / 20 / 2011
Transaction ID : 3133485
Amount of Each Receipt this Period
35.00

B. Enid Ewen
Full Name (Last, First, Middle Initial)
Mailing Address 1563 Golfcrest Place
City Vista State CA Zip Code 92081
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 ▼ 360.00

Date of Receipt
12 / 18 / 2011
Transaction ID : 3131231
Amount of Each Receipt this Period
30.00

C. Ms. Jeanne L. Ewy
Full Name (Last, First, Middle Initial)
Mailing Address 2 Second Street #3106
City Jersey City State NJ Zip Code 07302
FEC ID number of contributing federal political committee. **C**
Name of Employer PPFA Occupation health care manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3120504
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 2452
(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. Joyce Faber

Mailing Address 1220 Cypress Point Ln.

City State Zip Code
Ventura CA 93003

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 ▼
425.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132225

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Ms. Rebecca Faery

Mailing Address 23 William St.

City State Zip Code
Cambridge MA 02139

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

Name of Employer Occupation
MIT College teacher/admi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
227.50

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134873

Amount of Each Receipt this Period
35.00

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

Mailing Address 4818 Melissa Ln

City State Zip Code
Dallas TX 75229

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

Name of Employer Occupation
REQUESTED Self

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3125561

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 635.00

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 2452 |
| | <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. Sandy Fainbar | | Date of Receipt 12 / 16 / 2011 Transaction ID : 3131442 |
| Mailing Address 300 Via Lido Nord | | Amount of Each Receipt this Period 140.00 |
| City Newport Beach | State CA | Zip Code 92663 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer REQUESTED | Occupation Homemaker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 265.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Debbie Fairfield | | Date of Receipt 12 / 29 / 2011 Transaction ID : 3137846 |
| Mailing Address 2109 Foxtail | | Amount of Each Receipt this Period 100.00 |
| City Bloomington | State IL | Zip Code 61704 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer State Farm | Occupation Manager | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 325.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Mr. George Fairman | | Date of Receipt 12 / 20 / 2011 Transaction ID : 3132723 |
| Mailing Address 8104 Highwood Dr. G139 8104 Highwood Dr. G139 | | Amount of Each Receipt this Period 50.00 |
| City Bloomington | State MN | Zip Code 55438 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 210.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 290.00 |
| 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 215 OF 2452 |
| | <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. Evan Fales
Full Name (Last, First, Middle Initial)
Mailing Address 1215 Oakcrest St.
City Iowa City State IA Zip Code 52246
FEC ID number of contributing federal political committee. **C**
Name of Employer Univ. of Iowa Occupation teacher
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
12 / 20 / 2011
Transaction ID : 3132724
Amount of Each Receipt this Period
90.00

B. Ms. Jennifer IL. Fallon
Full Name (Last, First, Middle Initial)
Mailing Address 203 Stratford, # 2
City Houston State TX Zip Code 77006
FEC ID number of contributing federal political committee. **C**
Name of Employer Baylor College of Medicine Occupation lab tech
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011
Transaction ID : 3129238
Amount of Each Receipt this Period
20.00

C. Ms. Mary K. Fancher
Full Name (Last, First, Middle Initial)
Mailing Address 1401 W Liberty St
City Ann Arbor State MI Zip Code 48103
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 ▼ 240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011
Transaction ID : 3128674
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 216 OF 2452
(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 Fandel
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 Topcrest Lane
 City State Zip Code
 Ridgefield CT 06877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 James G. Rogers Architects Director of Operatio
 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
 12 / 22 / 2011
Transaction ID : 3134193
 Amount of Each Receipt this Period
 25.00

B. Ms. Cecile Farber
 Full Name (Last, First, Middle Initial)
 Mailing Address 610 Waring Ave.
 City State Zip Code
 Bronx NY 10467
 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 ▼
 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2011
Transaction ID : 3130175
 Amount of Each Receipt this Period
 20.00

C. Dr. Emmanuel Farber
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 Wildewood Downs Circle B3
 Unit B303
 City State Zip Code
 Columbia SC 29223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 none none-retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3127461
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 2452 |
| | <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. Stephanie Fariss
Full Name (Last, First, Middle Initial)

Mailing Address 33 W Huron St

City Chicago State IL Zip Code 60654

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

Name of Employer Self Occupation Psychoanalyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt 12 / 24 / 2011

Transaction ID : 3135735

Amount of Each Receipt this Period 25.00

B. Ms. Elaine Farrant
Full Name (Last, First, Middle Initial)

Mailing Address 4613 Briarclift Rd.

City Baltimore State MD Zip Code 21229

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 12 / 28 / 2011

Transaction ID : 3135169

Amount of Each Receipt this Period 500.00

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

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 Farrar Financials Occupation Wealth Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 30 / 2011

Transaction ID : 3138394

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 218 OF 2452 |
| | (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. Mr. Ellen A A. Farrior

Mailing Address PO Box 1149

City Montreat State NC Zip Code 28757

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 ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : 3129208

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Ms. Katherine Farris

Mailing Address 811 E Salem Ave

City Indianola State IA Zip Code 50125

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 ▼ **1020.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2011

Transaction ID : 3130993

Amount of Each Receipt this Period
85.00

Full Name (Last, First, Middle Initial)
C. Ms. Sarah Faulkner

Mailing Address 108 Sumach St

City Lookout Mtn State TN Zip Code 37350

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

Name of Employer none Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 21 / 2011

Transaction ID : 3134246

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **210.00**

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 219 OF 2452
(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. Roberta L Fauriol
 Full Name (Last, First, Middle Initial)
 Mailing Address 2713 Berryland Drive
 City State Zip Code
 Oakton VA 22124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CSIS Editor
 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
 12 / 15 / 2011
Transaction ID : 3129471
 Amount of Each Receipt this Period
 25.00

B. Ms. Holly Fechner
 Full Name (Last, First, Middle Initial)
 Mailing Address 7213 Spruce Ave.
 City State Zip Code
 Takoma Park MD 20912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Covington & Burling LLP Lawyer
 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
 12 / 05 / 2011
Transaction ID : 3120510
 Amount of Each Receipt this Period
 1000.00

C. Mrs. Betty Feinberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 7919 S. Galileo Lane
 City State Zip Code
 Tucson AZ 85747
 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 ▼
 331.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3124212
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1075.00
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 2452 |
| | <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. Roberta Feinstein
Full Name (Last, First, Middle Initial)
Mailing Address 320 Claymore Blvd.
City Cleveland State OH Zip Code 44143
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 ▼ 225.00

Date of Receipt 12 / 01 / 2011
Transaction ID : 3119153
Amount of Each Receipt this Period 100.00

B. Ms. Elizabeth T. Fellows
Full Name (Last, First, Middle Initial)
Mailing Address 8465 Barton Road
City Granite Bay State CA Zip Code 95746
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 ▼ 291.00

Date of Receipt 12 / 11 / 2011
Transaction ID : 3125850
Amount of Each Receipt this Period 40.00

C. Dr. Diane Felsen
Full Name (Last, First, Middle Initial)
Mailing Address 45 76th St.
City Brooklyn State NY Zip Code 11209
FEC ID number of contributing federal political committee. **C**
Name of Employer WMC Occupation WCML
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 02 / 2011
Transaction ID : 3119665
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 390.00
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 221 OF 2452
(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. Celia A Felsher

Mailing Address 521 Eagle Knolls Road

City Larchmont State NY Zip Code 10538

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

Name of Employer Reservoir Operations Occupation attorney

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
 12 / 29 / 2011
Transaction ID : 3138225

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Ms. Jean A Felton

Mailing Address 657 Happy Valley Road

City Pleasanton State CA Zip Code 94566

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 ▼ **1200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3140592

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Ms. Judith Fenton

Mailing Address 2916 Andros Street

City Costa Mesa State CA Zip Code 92626

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 M / D D D / Y Y Y Y Y Y
 12 / 26 / 2011
Transaction ID : 3135783

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **500.00**

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 2452
(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 H Ferguson
 Full Name (Last, First, Middle Initial)
 Mailing Address 4088 Cerrito Lane
 City Santa Barbara State CA Zip Code 93110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation Housewife
 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
 12 / 13 / 2011
Transaction ID : 3126709
 Amount of Each Receipt this Period
 100.00

B. Ms. Elizabeth A Ferguson
 Full Name (Last, First, Middle Initial)
 Mailing Address 12319 Forest School Lane
 City Louisville State KY Zip Code 40223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Red Dot Photography Occupation 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
 12 / 21 / 2011
Transaction ID : 3133982
 Amount of Each Receipt this Period
 1000.00

C. Ms. Natalina Ferlauto
 Full Name (Last, First, Middle Initial)
 Mailing Address 109 Babbs Holw.
 City Greenville State SC Zip Code 29607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation Homemaker
 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
 12 / 19 / 2011
Transaction ID : 3131832
 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 223 OF 2452 |
| | <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. Judith F. Fernandez
Full Name (Last, First, Middle Initial)
Mailing Address 1033 Moanakai Road

| | | |
|----------------|-------------|-------------------|
| City Kapa'a | State HI | Zip Code 96746 |
|----------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3130831

Amount of Each Receipt this Period
50.00

B. Ms. Judith F. Fernandez
Full Name (Last, First, Middle Initial)
Mailing Address 1033 Moanakai Road

| | | |
|----------------|-------------|-------------------|
| City Kapa'a | State HI | Zip Code 96746 |
|----------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 17 | / | 2011 |

Transaction ID : 3130832

Amount of Each Receipt this Period
50.00

C. Ms. Laura I I. Ferns
Full Name (Last, First, Middle Initial)
Mailing Address 1690 N Crystal Cv

| | | |
|-----------------|-------------|-------------------|
| City Haslett | State MI | Zip Code 48840 |
|-----------------|-------------|-------------------|

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

| | |
|---------------------------|--------------------------|
| Name of Employer Nurse | Occupation retired RN |
|---------------------------|--------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2011 |

Transaction ID : 3139143

Amount of Each Receipt this Period
25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 125.00 |
| 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 224 OF 2452 |
| | <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. Clairan Ferrono
Full Name (Last, First, Middle Initial)

Mailing Address 5432 S Dorchester Ave.

| | | |
|-----------------|-------------|-------------------|
| City Chicago | State IL | Zip Code 60615 |
|-----------------|-------------|-------------------|

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

| | |
|--------------------------|----------------------|
| Name of Employer Self | Occupation Artist |
|--------------------------|----------------------|

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128834

Amount of Each Receipt this Period

| |
|-------|
| 25.00 |
|-------|

B. Ms. Doris Feyling
Full Name (Last, First, Middle Initial)

Mailing Address 882 Elizabeth Street

| | | |
|-----------------------|-------------|-------------------|
| City San Francisco | State CA | Zip Code 94114 |
|-----------------------|-------------|-------------------|

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 ▼ **300.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129429

Amount of Each Receipt this Period

| |
|-------|
| 25.00 |
|-------|

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

Mailing Address 21805 Cumberland Dr.

| | | |
|--------------------|-------------|-------------------|
| City Northville | State MI | Zip Code 48167 |
|--------------------|-------------|-------------------|

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 ▼ **202.50**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3131463

Amount of Each Receipt this Period

| |
|-------|
| 50.00 |
|-------|

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 100.00 |
| 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 225 OF 2452 |
| | <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. Amy L. Fikes | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 |
| Mailing Address 3901 Euclid Avenue | | Transaction ID : 3125899 |
| City Dallas | State TX | Zip Code 75205 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 4000.00 |
| Name of Employer none | Occupation Homemaker | |
| 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) B. Mr. Ernest G Fine | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2011 |
| Mailing Address 44284 Panther Ridge Dr. | | Transaction ID : 3130185 |
| City Ashburn | State VA | Zip Code 20147 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 |
| Name of Employer n/a | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 550.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Paula Goodman Finedore | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 16302 Dahl Rd. | | Transaction ID : 3131851 |
| City Laurel | State MD | Zip Code 20707 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 75.00 |
| Name of Employer US Govt | Occupation Teacher | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 550.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 4125.00 |
| 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 2452 |
| | <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. Pamela Fingleton
 Full Name (Last, First, Middle Initial)
 Mailing Address 168 East 74 Street
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lindblad Expeditions Occupation Executive Assistant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 3126192
 Amount of Each Receipt this Period
 50.00

B. Mr. Edward L. Finn
 Full Name (Last, First, Middle Initial)
 Mailing Address 550 S Ocean BLVD Apt 601 Apt 601
 City Boca Raton State FL Zip Code 33432
 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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 3125445
 Amount of Each Receipt this Period
 200.00

C. Ms. Nancy F Fiora
 Full Name (Last, First, Middle Initial)
 Mailing Address 8851 N. Loeffler Lane
 City Tucson State AZ Zip Code 85742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U. S. District Court Occupation Judge, RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3138785
 Amount of Each Receipt this Period
 50.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 300.00 |
| 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 227 OF 2452
(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. Lillian Fischer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3401 Fort Independence St.
 City State Zip Code
 Bronx NY 10463
 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 ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131634
 Amount of Each Receipt this Period
 200.00

B. Ms. Susan S. Fischer
 Full Name (Last, First, Middle Initial)
 Mailing Address 2436 Oregon Street
 City State Zip Code
 Berkeley CA 94705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 EB Center for Performing Arts PT admin assistant
 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
 12 / 28 / 2011
Transaction ID : 3137399
 Amount of Each Receipt this Period
 50.00

C. Mr. H. Kenneth Fish
 Full Name (Last, First, Middle Initial)
 Mailing Address 865 Central Ave. Apt.F-304
 City State Zip Code
 Needham MA 02492
 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
 12 / 11 / 2011
Transaction ID : 3125800
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00
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 228 OF 2452 |
| | <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. Aleta Fisher
Full Name (Last, First, Middle Initial)
Mailing Address 1166 Lindenwood Drive
City Tarpon Springs State FL Zip Code 34688
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 **500.00**

Date of Receipt **12 / 15 / 2011**
Transaction ID : 3128321
Amount of Each Receipt this Period **250.00**

B. Mr. James E. Fisher
Full Name (Last, First, Middle Initial)
Mailing Address 144 N Fireweed St., Apt. 3
City Soldotna State AK Zip Code 99669
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 **925.00**

Date of Receipt **12 / 20 / 2011**
Transaction ID : 3133364
Amount of Each Receipt this Period **25.00**

C. Lea Fisher
Full Name (Last, First, Middle Initial)
Mailing Address 628 I (EYE) Street SE
City Washington State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C**
Name of Employer PhRMA Occupation Senior Director Fede
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **500.00**

Date of Receipt **12 / 06 / 2011**
Transaction ID : 3122291
Amount of Each Receipt this Period **500.00**

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 229 OF 2452 |
| | <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. Audrey Fisher

Mailing Address 226 Kimberly Ann Dr

City Hendersonville State NC Zip Code 28792

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 ▼ **215.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2011

Transaction ID : 3120003

Amount of Each Receipt this Period
 15.00

Full Name (Last, First, Middle Initial)
B. Ms. Sara Fisher

Mailing Address 80 Azalea Cir Unit 18

City White River Junction State VT Zip Code 05001

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
 12 / 16 / 2011

Transaction ID : 3131099

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. Ms. Katherine Flegal

Mailing Address 1238 Martin Luther King Jr Way

City Berkeley State CA Zip Code 94709

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

Name of Employer National Center for Health Statistics Occupation Statistician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **288.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3128747

Amount of Each Receipt this Period
 24.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **64.00**

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 230 OF 2452
(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. Sharan Fleming
 Full Name (Last, First, Middle Initial)
 Mailing Address 4213 Curragh Oaks Ln
 City Fair Oaks State CA Zip Code 95628
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : 3123359
 Amount of Each Receipt this Period
 100.00

B. Ms. Becky Fleming
 Full Name (Last, First, Middle Initial)
 Mailing Address 7920 108th Ave. NE
 City Norman State OK Zip Code 73026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Becky Fleming, CPA, Inc. Occupation CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132095
 Amount of Each Receipt this Period
 250.00

C. Ellen Floriani
 Full Name (Last, First, Middle Initial)
 Mailing Address 1221 Kings Way Lane
 City Tarpon Springs State FL Zip Code 34688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation business administrat
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3122296
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 370.00
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 2452 |
| | <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. Dr. Nancy Flournoy
 Full Name (Last, First, Middle Initial)
 Mailing Address 3105 Trailside Dr
 City Columbia State MO Zip Code 65203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Missouri Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 25 / 2011
Transaction ID : 3135625
 Amount of Each Receipt this Period
 1000.00

B. Ms. Elaine Flynn
 Full Name (Last, First, Middle Initial)
 Mailing Address 235 Ticetown Rd.
 City Old Bridge State NJ Zip Code 08857
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Middlesex Cty Occupation County Clerk
 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
 12 / 19 / 2011
Transaction ID : 3132192
 Amount of Each Receipt this Period
 125.00

C. Ms. Joyce Flynn
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1915
 City Quogue State NY Zip Code 11959
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Three Village Central Schools Occupation retired school admin
 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
 12 / 06 / 2011
Transaction ID : 3122897
 Amount of Each Receipt this Period
 25.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1150.00 |
| 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 232 OF 2452 |
| | <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. Elisabeth Fonseca | | Date of Receipt |
| Mailing Address 56 Stonegate Court | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City Carmel State NY Zip Code 10512 | | Transaction ID : 3128326 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer Self-Employed Occupation psychologist | | <input type="text" value="15.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="325.00"/> |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Ms. Elisabeth Fonseca | | Date of Receipt |
| Mailing Address 56 Stonegate Court | | <input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2011"/> |
| City Carmel State NY Zip Code 10512 | | Transaction ID : 3135785 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer Self-Employed Occupation psychologist | | <input type="text" value="20.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="325.00"/> |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Ms. Marie Fontana | | Date of Receipt |
| Mailing Address 184 Godfrey Drive | | <input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2011"/> |
| City Norton State MA Zip Code 02766 | | Transaction ID : 3125759 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer NA Occupation Retired | | <input type="text" value="20.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="240.00"/> |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="55.00"/> |
| 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 233 OF 2452 |
| | (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. Kathleen Ford
Full Name (Last, First, Middle Initial)
Mailing Address 318 N. Kenwood St.
City Burbank State CA Zip Code 91505
FEC ID number of contributing federal political committee. **C**
Name of Employer City of Burbank Occupation Account Clerk
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 470.00

Date of Receipt
12 / 17 / 2011
Transaction ID : 3130195
Amount of Each Receipt this Period
100.00

B. Ms. Sylvia Ford
Full Name (Last, First, Middle Initial)
Mailing Address 700 Greenlawn Dr.
City Columbia State SC Zip Code 29209
FEC ID number of contributing federal political committee. **C**
Name of Employer US gov Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3400.00

Date of Receipt
12 / 06 / 2011
Transaction ID : 3122840
Amount of Each Receipt this Period
500.00

C. Ms. Sharon Forker
Full Name (Last, First, Middle Initial)
Mailing Address 2208 W 125th St.
City Leawood State KS Zip Code 66209
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 ▼ 540.00

Date of Receipt
12 / 27 / 2011
Transaction ID : 3134690
Amount of Each Receipt this Period
115.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 715.00
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 2452 |
| | (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. Mary Forman

Mailing Address 210 Villard Ave.

City Hastings On Hudson State NY Zip Code 10706

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 ▼ **305.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011

Transaction ID : 3131480

Amount of Each Receipt this Period
 300.00

Full Name (Last, First, Middle Initial)
B. Ms. Jody Forman

Mailing Address 370 Fence Road

City Earlysville State VA Zip Code 22936

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

Name of Employer Self Occupation Licensed Acupuncturi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011

Transaction ID : 3124867

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Ms. Jody Forman

Mailing Address 370 Fence Road

City Earlysville State VA Zip Code 22936

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

Name of Employer Self Occupation Licensed Acupuncturi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3133208

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **70.00**

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 235 OF 2452
(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. Barbara Louise Forster

Mailing Address 700 S. 2nd St. #71

City State Zip Code
Minneapolis MN 55401

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 ▼
2135.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3122073

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Ms. Ella M Forsyth

Mailing Address 219 Graham St.

City State Zip Code
Carlisle PA 17013

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 ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131461

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
C. Mr. John M. Foster

Mailing Address 121 Spencer Drive

City State Zip Code
Amherst MA 01002

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 ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133511

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1130.00

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 2452 |
| | <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. Stephenie Foster
Full Name (Last, First, Middle Initial)

Mailing Address 3017 Dent Pl., NW

City Washington State DC Zip Code 20007

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

Name of Employer self Occupation 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
 12 / 07 / 2011

Transaction ID : 3123436

Amount of Each Receipt this Period
1000.00

B. Mr. Clinton R. Foulk
Full Name (Last, First, Middle Initial)

Mailing Address 843 Cypress Pkwy. # 403

City Kissimmee State FL Zip Code 34759

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 ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3133446

Amount of Each Receipt this Period
50.00

C. Mrs. Jessie F. Fournier
Full Name (Last, First, Middle Initial)

Mailing Address 728 Brentwood Ct.

City Los Altos State CA Zip Code 94024

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 ▼
1061.88

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011

Transaction ID : 3134852

Amount of Each Receipt this Period
140.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1190.00 |
| 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 2452 (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. Ms. Patricia Fowler | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 02 / 2011 |
| Mailing Address PO Box 124 | | Transaction ID : 3120026 |
| City Lumberton | State NJ | Zip Code 08048 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 20.00 | |
| 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 ▼ 227.11 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Mr. Gregory A Fowler | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address PO Box 390689 | | Transaction ID : 3128143 |
| City Mountain View | State CA | Zip Code 94039 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100.00 | |
| Name of Employer self | Occupation Consultant | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 460.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Deborah Fowler | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 29 Ballard DR | | Transaction ID : 3127229 |
| City West Hartford | State CT | Zip Code 06119 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 120.12 | |
| Name of Employer University of Hartford | Occupation Librarian | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 270.12 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 240.12 |
| 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 238 OF 2452 |
| | <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. Patricia Fox
Full Name (Last, First, Middle Initial)
Mailing Address 5335 Golf View Rd.
City Belleaire State MI Zip Code 49615
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation Retired Teacher
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **265.00**

Date of Receipt **12 / 18 / 2011**
Transaction ID : 3130942
Amount of Each Receipt this Period **200.00**

B. Ms. Eileen Franch
Full Name (Last, First, Middle Initial)
Mailing Address 607 E. 34th St.
City Baltimore State MD Zip Code 21218
FEC ID number of contributing federal political committee. **C**
Name of Employer Maryland Legal Aid Bureau Occupation lawyer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **235.00**

Date of Receipt **12 / 03 / 2011**
Transaction ID : 3119955
Amount of Each Receipt this Period **50.00**

C. Ms. Eileen Franch
Full Name (Last, First, Middle Initial)
Mailing Address 607 E. 34th St.
City Baltimore State MD Zip Code 21218
FEC ID number of contributing federal political committee. **C**
Name of Employer Maryland Legal Aid Bureau Occupation lawyer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **235.00**

Date of Receipt **12 / 29 / 2011**
Transaction ID : 3138282
Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **170.00**
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 239 OF 2452 |
| | <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. LoVern Francis | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 1025 Parakeet Trl. | | Transaction ID : 3129384 |
| City Lakeland | State FL | Zip Code 33809 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 20.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Myrna R. Frankel | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 21 / 2011 |
| Mailing Address 214 Spruce St. | | Transaction ID : 3133579 |
| City San Francisco | State CA | Zip Code 94118 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Self | Occupation Psychoanalyst | |
| 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. Edie Fraser | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2011 |
| Mailing Address 2916 32nd Street NW | | Transaction ID : 3123683 |
| City Washington | State DC | Zip Code 20008 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Diversified Search | Occupation Consulting | |
| 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).....▶ | 1520.00 |
| 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 240 OF 2452 |
| | <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. Martha C. Frede
Full Name (Last, First, Middle Initial)
Mailing Address 4330 Bull Creek Rd.
#106
City Austin State TX Zip Code 78731
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 ▼ 325.00

Date of Receipt
12 / 14 / 2011
Transaction ID : 3128055
Amount of Each Receipt this Period
100.00

B. Ms. Ann Freed
Full Name (Last, First, Middle Initial)
Mailing Address 95-227 Waikalani Drive A403
City Mililani State HI Zip Code 96789
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation retired US Army LTC
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
12 / 14 / 2011
Transaction ID : 3128662
Amount of Each Receipt this Period
25.00

C. Ms. Ann Freed
Full Name (Last, First, Middle Initial)
Mailing Address 95-227 Waikalani Drive A403
City Mililani State HI Zip Code 96789
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation retired US Army LTC
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3128663
Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 241 OF 2452 |
| | <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 Freeman
Full Name (Last, First, Middle Initial)
Mailing Address 6036 E Rose Circle Dr
City Phoenix State AZ Zip Code 85018
FEC ID number of contributing federal political committee. **C**
Name of Employer Lewis and Roca LLP Occupation Lawyer
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
12 / 11 / 2011
Transaction ID : 3125905
Amount of Each Receipt this Period
1000.00

B. Dr. Ralph B. Freidin
Full Name (Last, First, Middle Initial)
Mailing Address 25 Channel CTR St., Unit 1102 #1102
City Boston State MA Zip Code 02210
FEC ID number of contributing federal political committee. **C**
Name of Employer Mt Auburn Hospital Occupation Physician
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
12 / 27 / 2011
Transaction ID : 3134746
Amount of Each Receipt this Period
250.00

C. Mrs. Frances French
Full Name (Last, First, Middle Initial)
Mailing Address 767 Timber 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 ▼ 217.81

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 27 / 2011
Transaction ID : 3134879
Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1285.00
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 242 OF 2452 |
| | <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. Ruth Freymann
Full Name (Last, First, Middle Initial)

Mailing Address 355 Blackstone Blvd Apt 201
Apt 201

City Providence State RI Zip Code 02906

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 ▼
660.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3128936

Amount of Each Receipt this Period
50.00

B. Ms. Margery Fridstein
Full Name (Last, First, Middle Initial)

Mailing Address 9066 Ranch River Circle

City Highlands Ranch State CO Zip Code 80126

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

Name of Employer Self Occupation counselor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3128543

Amount of Each Receipt this Period
100.00

C. Ms. Laura Friedland
Full Name (Last, First, Middle Initial)

Mailing Address 3025 Normandy PL

City Evanston State IL Zip Code 60201

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

Name of Employer none Occupation teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 / 13 / 2011
Transaction ID : 3126770

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

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 2452 |
| | <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. Joyce Friedman | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2011 |
| Mailing Address 221 Mt Auburn St #304 | | Transaction ID : 3122732 |
| City Cambridge | State MA | Zip Code 02138 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2500.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 3500.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Roxane C. Friedman | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2011 |
| Mailing Address 4919 S Dorchester Ave. | | Transaction ID : 3135175 |
| City Chicago | State IL | Zip Code 60615 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| 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 ▼ 400.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Barbara R. Friedman | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 |
| Mailing Address 204 Travis Street #5D | | Transaction ID : 3125826 |
| City Houston | State TX | Zip Code 77002 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer Self | Occupation Filmmaker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1200.00 | |

| | |
|--|---------|
| 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: PAGE 244 OF 2452
(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 Friebling
 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 Prof. Gant. Assoc. P.C. Occupation Physician
 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
 12 / 15 / 2011
Transaction ID : 3129805
 Amount of Each Receipt this Period
 300.00

B. Ms. Mildred J. Friend
 Full Name (Last, First, Middle Initial)
 Mailing Address 5100 S Saint Clair Rd.
 City Saint Johns State MI Zip Code 48879
 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 ▼ 415.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131842
 Amount of Each Receipt this Period
 115.00

C. Ms. Janice Friesen
 Full Name (Last, First, Middle Initial)
 Mailing Address 5490 Jensen Rd
 City Castro Valley State CA Zip Code 94552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation clinical social work
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128915
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 440.00
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 245 OF 2452 |
| | <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 L. Friss
Full Name (Last, First, Middle Initial)

Mailing Address 12820 University Cres #2C

| | | |
|----------------|-------------|-------------------|
| City Carmel | State IN | Zip Code 46032 |
|----------------|-------------|-------------------|

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

| | |
|-------------------------------------|-----------------------|
| Name of Employer Eli Lilly & Co. | Occupation Manager |
|-------------------------------------|-----------------------|

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 |
| 12 | / | 28 | / | 2011 |

Transaction ID : 3136373

Amount of Each Receipt this Period
500.00

B. Ms. Joann Fritsche
Full Name (Last, First, Middle Initial)

Mailing Address 5410 81st Avenue Ct W

| | | |
|-----------------------|-------------|-------------------|
| City University Pl | State WA | Zip Code 98467 |
|-----------------------|-------------|-------------------|

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

| | |
|-----------------------------------|--------------------------------|
| Name of Employer Self-Employed | Occupation Fundraising Mgr. |
|-----------------------------------|--------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
720.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128614

Amount of Each Receipt this Period
60.00

C. Ms. Patti P. Frounfelter
Full Name (Last, First, Middle Initial)

Mailing Address 125 N. Pansy Street

| | | |
|-------------------|-------------|-------------------|
| City Ishpeming | State MI | Zip Code 49849 |
|-------------------|-------------|-------------------|

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

| | |
|---------------------------------|--------------------------|
| Name of Employer Wiacorp, PC | Occupation Bookkeeper |
|---------------------------------|--------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128630

Amount of Each Receipt this Period
20.00

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 580.00 |
| 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 2452 |
| | <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. Mr. Rpbert E. Frye
 Full Name (Last, First, Middle Initial)
 Mailing Address 5324 Guilford Ave.
 City Indianapolis State IN Zip Code 46220
 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 ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2011
Transaction ID : 3119747
 Amount of Each Receipt this Period
 500.00

B. Ms. Margaret L L Fuller
 Full Name (Last, First, Middle Initial)
 Mailing Address 2013 N. Tatnall Street Apt 1504
 City Wilmington State DE Zip Code 19802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Morris, Nichols, Aught, and Tunn Occupation Legal Secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129071
 Amount of Each Receipt this Period
 20.00

C. Kate Earle Funk
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Greenwood Common
 City Berkeley State CA Zip Code 94708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Keyser Marston Associates Occupation Economist
 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
 12 / 12 / 2011
Transaction ID : 3125420
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 720.00
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 2452
(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. Jody Furlong

Mailing Address 445 E. North Warter St.
Unit 1304

City Chicago State IL Zip Code 60611

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

Name of Employer N/A Occupation Volunteer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123765

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
B. Ms. Mary Ellen Furstenberg

Mailing Address 3566 LLoyd Drive

City Ft Lauderdale State FL Zip Code 33309

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

Name of Employer Self Occupation Nurse Anesthetist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3128504

Amount of Each Receipt this Period
30.00

Full Name (Last, First, Middle Initial)
C. Ms. Karen E. Fustes

Mailing Address 1011 W. Monroe

City Austin State TX Zip Code 78704

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 ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011

Transaction ID : 3128073

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

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 248 OF 2452 |
| | <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 Gaborko
Full Name (Last, First, Middle Initial)
Mailing Address 39638 Freemark Abbey
City Murrieta State CA Zip Code 92563
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 ▼ 275.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129376
Amount of Each Receipt this Period
25.00

B. Ms. Marian L. Gade
Full Name (Last, First, Middle Initial)
Mailing Address 136 Highland Blvd.
City Kensington State CA Zip Code 94708
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 ▼ 384.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129044
Amount of Each Receipt this Period
32.00

C. Ms. Carol Gailey
Full Name (Last, First, Middle Initial)
Mailing Address 347 La Mesa Ave
City Encinitas State CA Zip Code 62024
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Marketing Research
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00

Date of Receipt
12 / 20 / 2011
Transaction ID : 3133271
Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 72.00
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 249 OF 2452
(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. Virginia Gaines
 Full Name (Last, First, Middle Initial)
 Mailing Address 52 Estambre Rd.
 City Santa Fe State NM Zip Code 87508
 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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2011
Transaction ID : 3135687
 Amount of Each Receipt this Period
 25.00

B. Ms. Elaine Galinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 7919 Prospect Place
 City La Jolla State CA Zip Code 92037
 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 ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3124227
 Amount of Each Receipt this Period
 500.00

C. Ms. Suzanne Gallant
 Full Name (Last, First, Middle Initial)
 Mailing Address 3827 Mainsail Circle
 City Westlake Vlg 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 ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128724
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 545.00
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 250 OF 2452
(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. Kathryn L. Gann

Mailing Address 4 Patricia Drive

City State Zip Code
N. Providence RI 02904

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

Name of Employer Occupation
Amylin Pharma Medical Science Liaison

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
 12 / 01 / 2011
Transaction ID : 3119380

Amount of Each Receipt this Period
400.00

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

Mailing Address 2716 Foster NE

City State Zip Code
Grand Rapids MI 49505

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 ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011
Transaction ID : 3133608

Amount of Each Receipt this Period
55.00

Full Name (Last, First, Middle Initial)
C. Ms. Loretta Garbrick

Mailing Address 10641 Rock Run Dr.

City State Zip Code
Potomac MD 20854

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 ▼
3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 3125410

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2095.00

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 2452 |
| | <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. Dawn E. Garcia
Full Name (Last, First, Middle Initial)
Mailing Address 208 Atherwood Ave.
City Redwood City State CA Zip Code 94061
FEC ID number of contributing federal political committee. **C**
Name of Employer Stanford University Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 16 / 2011
Transaction ID : 3131046
Amount of Each Receipt this Period
100.00

B. Ms. Nancy Gardiner
Full Name (Last, First, Middle Initial)
Mailing Address 809 N Marsh Ln.
City Florence State OR Zip Code 97439
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 ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 29 / 2011
Transaction ID : 3135309
Amount of Each Receipt this Period
100.00

C. Ms. Clementina Gardner
Full Name (Last, First, Middle Initial)
Mailing Address
City Morristown State NJ Zip Code 07960
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
12 / 21 / 2011
Transaction ID : 3133719
Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶ 1200.00
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 2452
(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. Dianne Gardner
 Full Name (Last, First, Middle Initial)
 Mailing Address 13725 Mar Scenic Drive
 City State Zip Code
 Del Mar CA 92014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Psychologist
 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
 12 / 14 / 2011
Transaction ID : 3127492
 Amount of Each Receipt this Period
 100.00

B. Mr. Giles W. Garmon
 Full Name (Last, First, Middle Initial)
 Mailing Address 19714 Blake Manor Road
 City State Zip Code
 Manor TX 78653
 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 ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : 3123746
 Amount of Each Receipt this Period
 20.00

C. Gail Garrow
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 306
 City State Zip Code
 Captiva FL 33924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Independent Consulta
 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
 12 / 04 / 2011
Transaction ID : 3119748
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00
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 253 OF 2452 |
| | <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 Garry | | Date of Receipt |
| Mailing Address 525 Valle Vista Ave. | | <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Oakland | CA | 94610 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3131214 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="200.00"/> |
| Name of Employer | Occupation | |
| n/a | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="240.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Holly W. Gauthier | | Date of Receipt |
| Mailing Address 224 Warwick Ave | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| South Orange | NJ | 07079 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3134405 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="300.00"/> |
| Name of Employer | Occupation | |
| Self Employed Consultant | Development Officer | |
| 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) ▼ | | |

| | | |
|--|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mrs. Berta Aguilera Gehry | | Date of Receipt |
| Mailing Address 1002 22nd. Street | | <input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Santa Monica | CA | 90403 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3135161 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="1500.00"/> |
| Name of Employer | Occupation | |
| Gehry Partners, LLP | Accountant | |
| 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) ▼ | | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="1820.00"/> |
| 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 254 OF 2452 |
| | <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. Berta Aguilera Gehry
 Full Name (Last, First, Middle Initial)
 Mailing Address 1002 22nd. Street
 City Santa Monica State CA Zip Code 90403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gehry Partners, LLP Occupation Accountant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3138799
 Amount of Each Receipt this Period
 500.00

B. Ms. Mary Jane Gentry
 Full Name (Last, First, Middle Initial)
 Mailing Address 680 Eaton St
 City Memphis State TN Zip Code 38120
 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 ▼ 635.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130925
 Amount of Each Receipt this Period
 15.00

C. Mrs. Ann B. Georgi
 Full Name (Last, First, Middle Initial)
 Mailing Address 44 Colrain Road
 City Topsfield State MA Zip Code 01983
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Harvard University Occupation Student Advisor
 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
 12 / 29 / 2011
Transaction ID : 3138200
 Amount of Each Receipt this Period
 500.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1015.00 |
| 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 255 OF 2452 |
| | <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. Mr. Lyle D. Gerard
 Full Name (Last, First, Middle Initial)
 Mailing Address 3908 Cascade Beach
 City Lutsen State MN Zip Code 55612
 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
 12 / 08 / 2011
Transaction ID : 3124849
 Amount of Each Receipt this Period
 250.00

B. Ms. Delores Gerlach
 Full Name (Last, First, Middle Initial)
 Mailing Address 1406 Dorothea Rd
 City Berkley State MI Zip Code 48072
 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 ▼ 240.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3128644
 Amount of Each Receipt this Period
 20.00

C. Ms. Theresa J. Germaine
 Full Name (Last, First, Middle Initial)
 Mailing Address 382 Central Park West #14J
 City New York State NY Zip Code 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3129539
 Amount of Each Receipt this Period
 20.00

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 65.00 |
| 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 2452 |
| | <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. Lisa German Foster
 Full Name (Last, First, Middle Initial)
 Mailing Address 3708 4th Street North
 City Arlington State VA Zip Code 22203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NVG, LLC Occupation consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 3126116
 Amount of Each Receipt this Period
500.00

B. Ms. Rosalie Gershenzon
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 Harvard Dr.
 City Davis State CA Zip Code 95616
 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
 12 / 27 / 2011
Transaction ID : 3134613
 Amount of Each Receipt this Period
250.00

C. Ms. Nona Ghent
 Full Name (Last, First, Middle Initial)
 Mailing Address 57 Norman Ct.
 City Walnut Creek State CA Zip Code 94595
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KAISER PERMANENTE Occupation PROJECT MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134666
 Amount of Each Receipt this Period
125.00

| | |
|---|---------------|
| 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 257 OF 2452
(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 Gibbons
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Redberry Ridge
 City Portola Valley State CA Zip Code 94028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation homemaker
 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
 12 / 12 / 2011
Transaction ID : 3125477
 Amount of Each Receipt this Period
 500.00

B. Ms. Lynn Gibbons
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Redberry Rdg.
 City Portola Valley State CA Zip Code 94028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation Homemaker
 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
 12 / 19 / 2011
Transaction ID : 3131833
 Amount of Each Receipt this Period
 300.00

C. Dr. Beverly J. Gibbs
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 279
 City Manchaca State TX Zip Code 78652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Texas Occupation UNIV PROF. ENERTIA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 615.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : 3134070
 Amount of Each Receipt this Period
 140.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 940.00
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 258 OF 2452 |
| | <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. Elaine Gibson
Full Name (Last, First, Middle Initial)
Mailing Address 3768 Brenner Dr.
City Santa Barbara State CA Zip Code 93105
FEC ID number of contributing federal political committee. **C**
Name of Employer SBMNH Occupation teacher
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **600.00**

Date of Receipt **12 / 20 / 2011**
Transaction ID : 3132746
Amount of Each Receipt this Period **250.00**

B. Ms. Mary Giddens
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 328
City LaBelle State FL Zip Code 33975
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation Cattle Rancher
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1100.00**

Date of Receipt **12 / 05 / 2011**
Transaction ID : 3120085
Amount of Each Receipt this Period **200.00**

C. Ms. Sharon Gilbert
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 16664
City Tucson State AZ Zip Code 85732
FEC ID number of contributing federal political committee. **C**
Name of Employer self-employed Occupation retired librarian
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **250.00**

Date of Receipt **12 / 22 / 2011**
Transaction ID : 3134266
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: PAGE 259 OF 2452
(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. Rose Marie Gillikin

Mailing Address P.O. Box 9628

City State Zip Code
Chapel Hill NC 27516

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

Name of Employer Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1092.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2011
Transaction ID : 3135846

Amount of Each Receipt this Period
84.00

Full Name (Last, First, Middle Initial)
B. Dr. Priscilla A Gilman

Mailing Address 4537 Deer Run

City State Zip Code
Evans GA 30809

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

Name of Employer Occupation
GA Health Sciences Univ Physician/educator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011
Transaction ID : 3121121

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Dr. Priscilla A Gilman

Mailing Address 4537 Deer Run

City State Zip Code
Evans GA 30809

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

Name of Employer Occupation
GA Health Sciences Univ Physician/educator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3135957

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 234.00

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 2452
(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 GA Health Sciences Univ Occupation Physician/educator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3139091
 Amount of Each Receipt this Period
 200.00

B. Ms. Angela Giral
 Full Name (Last, First, Middle Initial)
 Mailing Address 460 Riverside Drive. Apt. 22
 City New York State NY Zip Code 10027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired from Columbia University Occupation retired librarian
 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
 12 / 20 / 2011
Transaction ID : 3133131
 Amount of Each Receipt this Period
 250.00

C. Zita Giraldo
 Full Name (Last, First, Middle Initial)
 Mailing Address 4000 Essex Ln #6108
 City Houston State TX Zip Code 77027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist/Painter
 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
 12 / 15 / 2011
Transaction ID : 3129647
 Amount of Each Receipt this Period
 20.00

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 261 OF 2452
(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. Susan Girard

Mailing Address 535 CORY WAY

City State Zip Code
Nipomo CA 93444

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

Name of Employer Occupation
self sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
206.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130218

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. Ms. Leona Gizzi

Mailing Address 47 Lafayette Pl

City State Zip Code
Greenwich CT 06830

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 ▼
242.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129491

Amount of Each Receipt this Period
 22.00

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

Mailing Address 12217 152nd Pl SE

City State Zip Code
Snohomish WA 98290

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

Name of Employer Occupation
WWU Senior instructor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3137703

Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 147.00

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 2452 |
| | (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. Ms. Kathleen S. Glancy | Date of Receipt M M / D D / Y Y Y Y Y 12 / 13 / 2011 Transaction ID : 3126248 | | |
| Mailing Address 5244 Marina Club Drive | Amount of Each Receipt this Period 250.00 | | |
| <table style="width: 100%;"> <tr> <td>City Wilmington</td> <td>State NC</td> <td>Zip Code 28409</td> </tr> </table> | | City Wilmington | State NC |
| City Wilmington | State NC | Zip Code 28409 | |
| 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. Gina Glantz | Date of Receipt M M / D D / Y Y Y Y Y 12 / 09 / 2011 Transaction ID : 3125574 | | |
| Mailing Address 411 Paradise Drive | Amount of Each Receipt this Period 1000.00 | | |
| <table style="width: 100%;"> <tr> <td>City Tiburon</td> <td>State CA</td> <td>Zip Code 94920</td> </tr> </table> | | City Tiburon | State CA |
| City Tiburon | State CA | Zip Code 94920 | |
| FEC ID number of contributing federal political committee. C | Aggregate Year-to-Date ▼ 1000.00 | | |
| Name of Employer n/a | | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|--|---|-------------------------|-------------|
| Full Name (Last, First, Middle Initial) C. Mr. Roger Gleckman | Date of Receipt M M / D D / Y Y Y Y Y 12 / 08 / 2011 Transaction ID : 3124960 | | |
| Mailing Address 7538 W 81st St | Amount of Each Receipt this Period 20.00 | | |
| <table style="width: 100%;"> <tr> <td>City Playa Del Rey</td> <td>State CA</td> <td>Zip Code 90293</td> </tr> </table> | | City Playa Del Rey | State CA |
| City Playa Del Rey | State CA | Zip Code 90293 | |
| FEC ID number of contributing federal political committee. C | Aggregate Year-to-Date ▼ 240.00 | | |
| 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)..... ▶ | 1270.00 |
| TOTAL This Period (last page this line number only)..... ▶ | 1270.00 |

**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 263 OF 2452 |
| | <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. Mont Glissmeyer
Full Name (Last, First, Middle Initial)

Mailing Address 3200 Hidden Valley Dr

City Santa Rosa State CA Zip Code 95404

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 ▼ **362.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2011

Transaction ID : 3126451

Amount of Each Receipt this Period
150.00

B. Ms. Ruth M. Glotzer
Full Name (Last, First, Middle Initial)

Mailing Address 70 Greylock Road

City West Newton State MA Zip Code 02465

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 M / D D D / Y Y Y Y Y Y
12 / 14 / 2011

Transaction ID : 3128047

Amount of Each Receipt this Period
100.00

C. Terry A. Glynn
Full Name (Last, First, Middle Initial)

Mailing Address 439 Edgewood Dr

City East Peoria State IL Zip Code 61611

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

Name of Employer RETIRED Occupation RETIRED ENGINEER

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
12 / 18 / 2011

Transaction ID : 3130222

Amount of Each Receipt this Period
50.00

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 300.00 |
| 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 264 OF 2452
(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. Kate Godfrey

Mailing Address 717 Lincoln Ave.

City Palo Alto State CA Zip Code 94301

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 M / D D D / Y Y Y Y Y Y
12 / 09 / 2011
Transaction ID : 3125216

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Mr. Bruce F. Goff

Mailing Address 1538 10th Avenue

City San Diego State CA Zip Code 92101

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

Name of Employer Self Employed Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2011
Transaction ID : 3126758

Amount of Each Receipt this Period
20.00

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

Mailing Address 194 Rawson Road

City Brookline State MA Zip Code 02445

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

Name of Employer IBM Occupation Marketing Executive

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
12 / 31 / 2011
Transaction ID : 3139088

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 370.00

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 265 OF 2452 |
| | <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. Ellen Gold
Full Name (Last, First, Middle Initial)
Mailing Address 11216 Stephalee Lane

| | | |
|-------------------|-------------|-------------------|
| City Rockville | State MD | Zip Code 20852 |
|-------------------|-------------|-------------------|

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

| | |
|--------------------------|------------------------------------|
| Name of Employer self | Occupation TOUR GUIDE Washingto |
|--------------------------|------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : 3119374

Amount of Each Receipt this Period

| |
|--------|
| 100.00 |
|--------|

B. Mrs. Ellen Gold
Full Name (Last, First, Middle Initial)
Mailing Address 11216 Stephalee Lane

| | | |
|-------------------|-------------|-------------------|
| City Rockville | State MD | Zip Code 20852 |
|-------------------|-------------|-------------------|

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

| | |
|--------------------------|------------------------------------|
| Name of Employer self | Occupation TOUR GUIDE Washingto |
|--------------------------|------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 14 | / | 2011 |

Transaction ID : 3128080

Amount of Each Receipt this Period

| |
|--------|
| 150.00 |
|--------|

C. Mrs. Ellen Gold
Full Name (Last, First, Middle Initial)
Mailing Address 11216 Stephalee Lane

| | | |
|-------------------|-------------|-------------------|
| City Rockville | State MD | Zip Code 20852 |
|-------------------|-------------|-------------------|

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

| | |
|--------------------------|------------------------------------|
| Name of Employer self | Occupation TOUR GUIDE Washingto |
|--------------------------|------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2011 |

Transaction ID : 3139093

Amount of Each Receipt this Period

| |
|-------|
| 10.00 |
|-------|

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| SUBTOTAL of Receipts This Page (optional).....▶ | 260.00 |
| 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 266 OF 2452 |
| | <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. Lesley E. Goldberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 822 Greenwich St.
 Apt 2A
 City New York State NY Zip Code 10014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JPMorgan Chase Bank, N.A. Occupation attorney
 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
 12 / 24 / 2011
Transaction ID : 3135427
 Amount of Each Receipt this Period
 100.00

B. 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
 12 / 15 / 2011
Transaction ID : 3129795
 Amount of Each Receipt this Period
 250.00

C. 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 Stanford University Occupation Professor
 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
 12 / 12 / 2011
Transaction ID : 3126184
 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 267 OF 2452
(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. Joan Golding
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Piney Woods Ct Apt 117
 City Houston State TX Zip Code 77077
 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 ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011
Transaction ID : 3133946
 Amount of Each Receipt this Period
 75.00

B. Ms. Nadja Z Golding
 Full Name (Last, First, Middle Initial)
 Mailing Address 1942 Rhode Island Ave.
 City Mc Lean State VA Zip Code 22101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation VOLUNTEER
 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
 12 / 27 / 2011
Transaction ID : 3134641
 Amount of Each Receipt this Period
 50.00

C. Harvey Goldman
 Full Name (Last, First, Middle Initial)
 Mailing Address 2129 Grand Oaks Ave
 City Altadena State CA Zip Code 91001
 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 ▼ 312.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131627
 Amount of Each Receipt this Period
 62.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 187.00
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 2452 |
| | <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. Rachel Goldman
Full Name (Last, First, Middle Initial)

Mailing Address 28 Beach Rd

City Ossining State NY Zip Code 10562

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

Name of Employer BG Occupation Attorney

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
 12 / 31 / 2011

Transaction ID : 3139131

Amount of Each Receipt this Period
 250.00

B. Dr. Richard M. Goldman
Full Name (Last, First, Middle Initial)

Mailing Address 25 Hendricks Isle

City Fort Lauderdale State FL Zip Code 33301

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 ▼ 216.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129338

Amount of Each Receipt this Period
 18.00

C. Mrs. Joanne T T. Goldsmith
Full Name (Last, First, Middle Initial)

Mailing Address 9911 Middle Mill Drive

City Owings Mills State MD Zip Code 21117

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 ▼ 216.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129048

Amount of Each Receipt this Period
 18.00

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 286.00 |
| 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 269 OF 2452 |
| | <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. Lynne Goldstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 3931 Binghamton Dr
 City Okemos State MI Zip Code 48864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Michigan State University Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3139100
 Amount of Each Receipt this Period
 40.00

B. Ms. Kathe Goldstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 2131 1st Ave SE #112
 City Cedar Rapids State IA Zip Code 52402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation retired teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126293
 Amount of Each Receipt this Period
 37.00

C. Ms. Kathe Goldstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 2131 1st Ave SE #112
 City Cedar Rapids State IA Zip Code 52402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation retired teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2011
Transaction ID : 3131107
 Amount of Each Receipt this Period
 75.00

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 152.00 |
| 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 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Ms. Barbara Goldthwaite | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 14 / 2011 Transaction ID : 3127516 |
| Mailing Address 2550C Havenwood Drive | | Amount of Each Receipt this Period 10.00 |
| City Oshkosh | State WI | Zip Code 54904 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer NA | Occupation Retired teacher | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 286.00 | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Jane Golub | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 3128248 |
| Mailing Address 10327 Ilona Avenue | | Amount of Each Receipt this Period 250.00 |
| City Los Angeles | State CA | Zip Code 90064 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Torah Aura Productions | Occupation Publisher | |
| 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. Sandy V Gooch | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 19 / 2011 Transaction ID : 3131893 |
| Mailing Address 116 Lighthouse Mall | | Amount of Each Receipt this Period 35.00 |
| City Marina del Rey | State CA | Zip Code 90292 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Sandy Gooch Enterprises | Occupation PROPERTY MANAGEMENT | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 205.00 | |

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 295.00 |
| 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 2452 |
| | <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. Janice A A. Goodman | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 3128999 | |
| Mailing Address 1333 Stockton Court | | Amount of Each Receipt this Period 25.00 | |
| City Indianapolis | State IN | Zip Code 46260 | |
| 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 ▼ 300.00 | | |

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Bobette Gorden | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 06 / 2011 Transaction ID : 3121772 | |
| Mailing Address 2248 S. Forest | | Amount of Each Receipt this Period 106.00 | |
| City Tempe | State AZ | Zip Code 85282 | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer INFLUENCE AT WORK | Occupation MRKTNG | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 481.00 | | |

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) C. Bobette Gorden | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 14 / 2011 Transaction ID : 3127519 | |
| Mailing Address 2248 S. Forest | | Amount of Each Receipt this Period 200.00 | |
| City Tempe | State AZ | Zip Code 85282 | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer INFLUENCE AT WORK | Occupation MRKTNG | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 481.00 | | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | 331.00 |
| TOTAL This Period (last page this line number only)..... ▶ | 331.00 |

**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 272 OF 2452 |
| | <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. Erla J J. Gordon | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 3128800 |
| Mailing Address 13814 Camus Road | | Amount of Each Receipt this Period 20.00 |
| City Anderson Is | State WA | Zip Code 98303 |
| FEC ID number of contributing federal political committee. C | Name of Employer n/a | Occupation Retired |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Susan G G. Gordon | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 3128719 |
| Mailing Address 3 Cooper Morris Drive | | Amount of Each Receipt this Period 75.00 |
| City Pomona | State NY | Zip Code 10970 |
| FEC ID number of contributing federal political committee. C | Name of Employer n/a | Occupation Retired |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 750.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Elizabeth Gore | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2011 Transaction ID : 3123540 |
| Mailing Address 6500 Smoot Drive | | Amount of Each Receipt this Period 250.00 |
| City McLean | State VA | Zip Code 22101 |
| FEC ID number of contributing federal political committee. C | Name of Employer Brownstein Hyatt Farber Schreck | Occupation Policy Director |
| 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).....▶ | 345.00 |
| 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 273 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Ms. Paula S. Gorman | | Date of Receipt 12 / 29 / 2011 Transaction ID : 3137874 |
| Mailing Address 10663 E Cottontail Lane | | Amount of Each Receipt this Period 150.00 |
| City Scottsdale | State AZ | Zip Code 85255 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation retired | |
| 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) B. Ms. Debra L Gottesman | | Date of Receipt 12 / 12 / 2011 Transaction ID : 3125498 |
| Mailing Address 100 Overlake Park | | Amount of Each Receipt this Period 500.00 |
| City Burlington | State VT | Zip Code 05401 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self Employed | Occupation PSYCHIATRIST | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1212.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Debra L Gottesman | | Date of Receipt 12 / 20 / 2011 Transaction ID : 3133534 |
| Mailing Address 100 Overlake Park | | Amount of Each Receipt this Period 500.00 |
| City Burlington | State VT | Zip Code 05401 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self Employed | Occupation PSYCHIATRIST | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1212.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1150.00 |
| 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 274 OF 2452 |
| | <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. Marian Gould
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6055

City Carmel By The Sea State CA Zip Code 93921

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 ▼ **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3124971

Amount of Each Receipt this Period
35.00

B. Ms. Barbara G. Grabowski
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 5678

City KETCHUM State ID Zip Code 83340

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 ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128737

Amount of Each Receipt this Period
20.00

C. Ms. Linda Simon Graham
Full Name (Last, First, Middle Initial)

Mailing Address 9718 Clagett Farm Dr

City Potomac State MD Zip Code 20854

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

Name of Employer M.I.T.C. Occupation Business Owner

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
 12 / 05 / 2011
Transaction ID : 3121589

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **555.00**

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 2452
(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. Rosalyn Graham

Mailing Address 81 Ticonderoga Road

City State Zip Code
Shelburne VT 05482

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 ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2011
Transaction ID : 3119917

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Ms. Joyce A. Graham

Mailing Address 32335 Brighton Park Blvd

City State Zip Code
solon OH 44139

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

Name of Employer Occupation
self cpa

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133135

Amount of Each Receipt this Period
150.00

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

Mailing Address 8303 Newbold Lane

City State Zip Code
Glenside PA 19038

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 ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2011
Transaction ID : 3130236

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 195.00

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 276 OF 2452 |
| | <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. Nancy L. G. Grandquist Fields | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 4119 Earl Drive | | Transaction ID : 3129359 |
| City Alexandria | State LA | Zip Code 71303 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 300.00 | |
| Name of Employer Fmr vp FHLBank | Occupation Community Banker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 360.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Mr. Charles H. Grant | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 349 2nd Ave., Apt. 2 | | Transaction ID : 3132048 |
| City San Francisco | State CA | Zip Code 94118 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100.00 | |
| Name of Employer n/a | Occupation Retired | |
| 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. cynthia grant | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2011 |
| Mailing Address 4327 43rd st nw | | Transaction ID : 3132761 |
| City washington | State DC | Zip Code 20016 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100.00 | |
| Name of Employer GAO | Occupation data analyst | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 230.00 |
| 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 2452
(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. Roseanne Grant
 Full Name (Last, First, Middle Initial)
 Mailing Address 1047 Indian Creek Rd
 City Wynnewood State PA Zip Code 19096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NA Occupation homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126736
 Amount of Each Receipt this Period
 50.00

B. Ms. Emili M. Grantham
 Full Name (Last, First, Middle Initial)
 Mailing Address 6515 Whitney Road
 City Graham State NC Zip Code 27253
 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
 12 / 18 / 2011
Transaction ID : 3131161
 Amount of Each Receipt this Period
 25.00

C. Ms. Patricia Gray
 Full Name (Last, First, Middle Initial)
 Mailing Address 1236 S. Geyer Rd.
 City Kirkwood State MO Zip Code 63122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gray and Hoffman Occupation Attorney
 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
 12 / 02 / 2011
Transaction ID : 3119656
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 278 OF 2452 |
| | <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. Sally Jackson Gray
Full Name (Last, First, Middle Initial)
Mailing Address 830 W 40th St Apt 665

| | | |
|-------------------|-------------|-------------------|
| City Baltimore | State MD | Zip Code 21211 |
|-------------------|-------------|-------------------|

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

| | |
|---------------------------------------|--------------------------|
| Name of Employer INVESTOR/ACTIVIST | Occupation Unemployed |
|---------------------------------------|--------------------------|

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 |
| 12 | / | 22 | / | 2011 |

Transaction ID : 3134081

Amount of Each Receipt this Period
125.00

B. Mr. Richard R. Gray
Full Name (Last, First, Middle Initial)
Mailing Address 131 Riverside Dr., 1-A

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10024 |
|------------------|-------------|-------------------|

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

| | |
|-----------------------------------|--------------------------|
| Name of Employer self-employed | Occupation consultant |
|-----------------------------------|--------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : 3120160

Amount of Each Receipt this Period
100.00

C. Mr. Justin J. Green
Full Name (Last, First, Middle Initial)
Mailing Address 5237 Brig Lane

| | | |
|-------------------|-------------|-------------------|
| City Knoxville | State TN | Zip Code 37914 |
|-------------------|-------------|-------------------|

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 ▼
300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129287

Amount of Each Receipt this Period
25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 250.00 |
| 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 279 OF 2452 |
| | <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 Green
Full Name (Last, First, Middle Initial)
Mailing Address 306 Rilla Vista Drive
City San Antonio State TX Zip Code 78216
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
12 / 15 / 2011
Transaction ID : 3128872
Amount of Each Receipt this Period
25.00

B. Susanna Green
Full Name (Last, First, Middle Initial)
Mailing Address 45 West 60th St Apt. 21H Apartment 21H
City New York State NY Zip Code 10023
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 **600.00**

Date of Receipt
12 / 15 / 2011
Transaction ID : 3128249
Amount of Each Receipt this Period
100.00

C. Kathryn Greenberg
Full Name (Last, First, Middle Initial)
Mailing Address 5009 Belt Road
City Washington State DC Zip Code 20016
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Fundraising
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt
12 / 09 / 2011
Transaction ID : 3125575
Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... **1125.00**
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 280 OF 2452 |
| | <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 Greene
Full Name (Last, First, Middle Initial)
Mailing Address 348 N. Midland Avenue
City Nyack State NY Zip Code 10960
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
12 / 16 / 2011
Transaction ID : 3131268
Amount of Each Receipt this Period
250.00

B. Ms. Isca Greenfield-Sanders
Full Name (Last, First, Middle Initial)
Mailing Address 110 West Shore Drive
City Putnam Valley State NY Zip Code 10579
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Artist
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
12 / 10 / 2011
Transaction ID : 3125878
Amount of Each Receipt this Period
20.00

C. Ms. Virginia Greenman
Full Name (Last, First, Middle Initial)
Mailing Address 1097 Ivy Hill Drive
City Mendota Heights State MN Zip Code 55118
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 ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 21 / 2011
Transaction ID : 3133833
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00
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 2452 (check only one) |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Mrs. Norma Greenwood
Full Name (Last, First, Middle Initial)
Mailing Address 1560 Branding Iron Trl.
City Mesquite State NV Zip Code 89034
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 ▼ 230.00

Date of Receipt
12 / 21 / 2011
Transaction ID : 3133692
Amount of Each Receipt this Period
55.00

B. Ms. Jon Greer
Full Name (Last, First, Middle Initial)
Mailing Address 568 Jean St
City Oakland State CA Zip Code 94610
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 ▼ 240.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123768
Amount of Each Receipt this Period
20.00

c. Mr. Henry D. Gregory
Full Name (Last, First, Middle Initial)
Mailing Address 1003 Nash St NW
City Wilson State NC Zip Code 27893
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
12 / 18 / 2011
Transaction ID : 3131174
Amount of Each Receipt this Period
25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 100.00 |
| 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 2452 |
| | <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. Wendy Grieder

Mailing Address 2475 Virginia Avenue NW # 904

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20037 |
|--------------------|-------------|-------------------|

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 ▼
360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129057

Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
B. Ms. Beth Griffin

Mailing Address 266 Merrimon Avenue, # 39

| | | |
|-------------------|-------------|-------------------|
| City Asheville | State NC | Zip Code 28801 |
|-------------------|-------------|-------------------|

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 ▼
610.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129328

Amount of Each Receipt this Period
 60.00

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

Mailing Address 3177 18th Street NW

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20010 |
|--------------------|-------------|-------------------|

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

| | |
|-------------------------|------------------------|
| Name of Employer NVG | Occupation lobbyist |
|-------------------------|------------------------|

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
 12 / 06 / 2011
Transaction ID : 3122336

Amount of Each Receipt this Period
 500.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 590.00 |
| 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 2452 |
| | <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. Loma Griffith
Full Name (Last, First, Middle Initial)

Mailing Address 8008 S. Mission Rd.

City Tucson State AZ Zip Code 85746

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

Name of Employer self Occupation homemaker

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
 12 / 09 / 2011
Transaction ID : 3125222

Amount of Each Receipt this Period
300.00

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

Mailing Address 328 Oxford Ave.

City Palo Alto State CA Zip Code 94306

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

Name of Employer Santa Clara County Occupation Judge

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
 12 / 20 / 2011
Transaction ID : 3133369

Amount of Each Receipt this Period
300.00

C. Mrs. Elise S. Grimes
Full Name (Last, First, Middle Initial)

Mailing Address 39866 S Sand Crest Dr

City Tucson State AZ Zip Code 85739

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 ▼ **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128250

Amount of Each Receipt this Period
250.00

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 580.00 |
| 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 284 OF 2452
(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. Robert Grimes Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 5710 Falling Leaf Ln
 City Riverside State CA Zip Code 92509
 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 ▼ 430.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131263
 Amount of Each Receipt this Period
 300.00

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 n/a Occupation Retired
 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
 12 / 07 / 2011
Transaction ID : 3123696
 Amount of Each Receipt this Period
 300.00

C. Lilah Groisser
 Full Name (Last, First, Middle Initial)
 Mailing Address 1010 Waltham St., Apt. 219
 City Lexington State MA Zip Code 02421
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2011
Transaction ID : 3119683
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 430.00
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 285 OF 2452 |
| | <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. Marilyn Gross
Full Name (Last, First, Middle Initial)

Mailing Address 5995 Pebble Beach Drive

| | | |
|------|-------|----------|
| City | State | Zip Code |
| Reno | NV | 89502 |

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

| | |
|-------------------------------|------------|
| Name of Employer | Occupation |
| Washoe County School District | teacher |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 06 | / | 2011 |

Transaction ID : 3122754

Amount of Each Receipt this Period

| |
|-------|
| 30.00 |
|-------|

B. Ms. Hanna Grossman
Full Name (Last, First, Middle Initial)

Mailing Address 221 Flat Rocks Rd

| | | |
|-----------------|-------|----------|
| City | State | Zip Code |
| Cornwall Bridge | CT | 06754 |

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 ▼ **450.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3130249

Amount of Each Receipt this Period

| |
|--------|
| 100.00 |
|--------|

C. Ms. Judith B. Grossman
Full Name (Last, First, Middle Initial)

Mailing Address 113 Richdale Ave #25

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Cambridge | MA | 02140 |

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

| | |
|------------------|----------------------|
| Name of Employer | Occupation |
| N/A | family caregiver/ret |

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 |
| 12 | / | 17 | / | 2011 |

Transaction ID : 3130250

Amount of Each Receipt this Period

| |
|-------|
| 25.00 |
|-------|

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 155.00 |
| 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 286 OF 2452 |
| | <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. Eva K. Grove
Full Name (Last, First, Middle Initial)
Mailing Address 171 Main St #278

| | | |
|-------------------|-------------|-------------------|
| City Los Altos | State CA | Zip Code 94022 |
|-------------------|-------------|-------------------|

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

| | |
|------------------------|-------------------------|
| Name of Employer na | Occupation homemaker |
|------------------------|-------------------------|

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 |
| 12 | / | 22 | / | 2011 |

Transaction ID : 3134278

Amount of Each Receipt this Period
4650.00

B. Ms. Ann C. Grover
Full Name (Last, First, Middle Initial)
Mailing Address 3524 NE 13th Ave

| | | |
|------------------|-------------|-------------------|
| City Portland | State OR | Zip Code 97212 |
|------------------|-------------|-------------------|

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 ▼
300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 30 | / | 2011 |

Transaction ID : 3138590

Amount of Each Receipt this Period
300.00

C. Miss Iris A A. Gruwell
Full Name (Last, First, Middle Initial)
Mailing Address 290 Stoneykirk Dr

| | | |
|---------------------|-------------|-------------------|
| City Bella Vista | State AR | Zip Code 72715 |
|---------------------|-------------|-------------------|

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 ▼
205.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128566

Amount of Each Receipt this Period
15.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 4965.00 |
| 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 2452 |
| | <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. Kathleen A Guinn
 Full Name (Last, First, Middle Initial)
 Mailing Address 83 Fair Oaks Dr
 City Pittsburgh State PA Zip Code 15238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation Retired Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2011
Transaction ID : 3130907
 Amount of Each Receipt this Period
 150.00

B. Ms. Paula M. Gullo
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Insbrook Ct
 City Huntington State NY Zip Code 11743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gullo Financial Management Occupation Financial Planner
 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
 12 / 16 / 2011
Transaction ID : 3130917
 Amount of Each Receipt this Period
 125.00

C. Ms. Martha Gurahian
 Full Name (Last, First, Middle Initial)
 Mailing Address 310 Heritage Hls., Unit A
 City Somers State NY Zip Code 10589
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133522
 Amount of Each Receipt this Period
 75.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 350.00 |
| 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 2452 |
| | <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. 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 Self | Occupation real estate investor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1300.00 | |

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 15 / 2011
Transaction ID : 3128596

Amount of Each Receipt this Period
1000.00

B. Ms. Karen B. Guthrie
Full Name (Last, First, Middle Initial)
Mailing Address 5252 Highcrest Drive

| | | |
|---|------------------------------------|-------------------|
| City Cameron Park | State CA | Zip Code 95682 |
| 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 ▼ 300.00 | |

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 27 / 2011
Transaction ID : 3134676

Amount of Each Receipt this Period
300.00

C. Ms. Betty Guttman
Full Name (Last, First, Middle Initial)
Mailing Address 1234 E Madison Park

| | | |
|---|------------------------------------|-------------------|
| City Chicago | State IL | Zip Code 60615 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | |

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 21 / 2011
Transaction ID : 3133581

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 289 OF 2452 |
| | <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. Jean Guttman
 Full Name (Last, First, Middle Initial)
 Mailing Address 178 Beethoven Ave.
 City Waban State MA Zip Code 02468
 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 ▼ 550.00

Date of Receipt
 12 / 16 / 2011
Transaction ID : 3131492
 Amount of Each Receipt this Period
 100.00

B. Ms. Carolyn L Haack
 Full Name (Last, First, Middle Initial)
 Mailing Address 4301 N Prospect Avenue
 City Shorewood State WI Zip Code 53211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BonTon Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3128653
 Amount of Each Receipt this Period
 20.00

C. Ms. Marian B. Haber
 Full Name (Last, First, Middle Initial)
 Mailing Address 5309 S. Kearney Street
 City Greenwood Village State CO Zip Code 80111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer europtiag Occupation COORDINATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 242.50

Date of Receipt
 12 / 11 / 2011
Transaction ID : 3125956
 Amount of Each Receipt this Period
 15.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 135.00 |
| 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 2452 |
| | <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

A. Dr. Emanuel Hackel
 Full Name (Last, First, Middle Initial)
 Mailing Address 244 Oakland Dr.
 City East Lansing State MI Zip Code 48823
 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 ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131944
 Amount of Each Receipt this Period
 500.00

B. Ms. Jean B. Hadfield
 Full Name (Last, First, Middle Initial)
 Mailing Address 4015 Lakepoint Rd
 City Champaign State IL Zip Code 61822
 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 ▼ 271.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2011
Transaction ID : 3135431
 Amount of Each Receipt this Period
 25.00

C. Ms. Judith Haecker
 Full Name (Last, First, Middle Initial)
 Mailing Address 716 N. 57th Ave.
 City Omaha State NE Zip Code 68132
 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 ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133165
 Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 625.00 |
| 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 291 OF 2452 |
| | <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 Hageman
Full Name (Last, First, Middle Initial)
Mailing Address 3912 W San Obispo St.
City Tampa State FL Zip Code 33629
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 **205.00**

Date of Receipt **12 / 19 / 2011**
Transaction ID : 3132249
Amount of Each Receipt this Period **35.00**

B. Nancy Hager
Full Name (Last, First, Middle Initial)
Mailing Address 256 West 10th
City New York State NY Zip Code 10014
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 **220.00**

Date of Receipt **12 / 14 / 2011**
Transaction ID : 3127539
Amount of Each Receipt this Period **100.00**

C. Ms. Rebecca Haile
Full Name (Last, First, Middle Initial)
Mailing Address 326 E. 18th Street
City New York State NY Zip Code 10003
FEC ID number of contributing federal political committee. **C**
Name of Employer Davis Polk & Wardwell Occupation Lawyer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1000.00**

Date of Receipt **12 / 05 / 2011**
Transaction ID : 3121605
Amount of Each Receipt this Period **1000.00**

SUBTOTAL of Receipts This Page (optional)..... **1135.00**
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 292 OF 2452
(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. Robert Haima
 Full Name (Last, First, Middle Initial)
 Mailing Address 497 Linder Rd NE
 City Iowa City State IA Zip Code 52240
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3122904
 Amount of Each Receipt this Period
 25.00

B. Ms. Shirley Haines
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 801
 City Canyon State TX Zip Code 79015
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128818
 Amount of Each Receipt this Period
 25.00

C. Ms. Laura Hainisch
 Full Name (Last, First, Middle Initial)
 Mailing Address 8520 Gardenia Dr
 City Seminole State FL Zip Code 33777
 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 ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128199
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
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 293 OF 2452 |
| | <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. Carlyn Halde
Full Name (Last, First, Middle Initial)
Mailing Address 63 Park Hill Ave.
City San Francisco State CA Zip Code 94117
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 **285.00**

Date of Receipt
12 / 28 / 2011
Transaction ID : 3137637
Amount of Each Receipt this Period
20.00

B. Ms. Karen R. Halderson
Full Name (Last, First, Middle Initial)
Mailing Address 3301 Monroe Street Unit N-148
City Albuquerque State NM Zip Code 87110
FEC ID number of contributing federal political committee. **C**
Name of Employer New Mexico State University Occupation Dietitian
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **334.24**

Date of Receipt
12 / 04 / 2011
Transaction ID : 3119867
Amount of Each Receipt this Period
15.00

C. Ms. Martha Hale
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1304
City Bernalillo State NM Zip Code 87004
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 **360.00**

Date of Receipt
12 / 18 / 2011
Transaction ID : 3130985
Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... **65.00**
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 2452 |
| | <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. Cynthia Hall
 Full Name (Last, First, Middle Initial)
 Mailing Address 511 Solar Rd NW
 City Albuquerque State NM Zip Code 87107
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128188
 Amount of Each Receipt this Period
 40.00

B. Ms. Beverly Hall
 Full Name (Last, First, Middle Initial)
 Mailing Address 2707 Bradmoor Way
 City Decatur State GA Zip Code 30034
 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
 12 / 16 / 2011
Transaction ID : 3131238
 Amount of Each Receipt this Period
 25.00

C. Ms. Kappy Hall
 Full Name (Last, First, Middle Initial)
 Mailing Address 316 E. Emma St.
 City Lafayette State CO Zip Code 80026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation educator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126748
 Amount of Each Receipt this Period
 20.00

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 85.00 |
| 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 295 OF 2452
(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. Mark Haller

Mailing Address 150 N. 20th St Apt. 308

City Philadelphia State PA Zip Code 19103

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 ▼
211.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129661

Amount of Each Receipt this Period
31.00

Full Name (Last, First, Middle Initial)
B. Ms. Roslyn W Halpern

Mailing Address 7546 SW Aloma Way # 1

City Portland State OR Zip Code 97223

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 ▼
360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129518

Amount of Each Receipt this Period
30.00

Full Name (Last, First, Middle Initial)
C. Ms. Marcia S Halpern

Mailing Address 142 Lost Bridge Drive

City Palm Beach Gardens State FL Zip Code 33410

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
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133155

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 311.00

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 296 OF 2452
(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. Lee Halprin

Mailing Address 104 Irving Street

City State Zip Code
Cambridge MA 02138

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

Name of Employer Occupation
Self Writer

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
12 / 12 / 2011
Transaction ID : 3126522

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. Mr. George Halsey

Mailing Address 111 Camellia Way

City State Zip Code
Hendersonville NC 28739

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 ▼
287.11

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2011
Transaction ID : 3134878

Amount of Each Receipt this Period
85.00

Full Name (Last, First, Middle Initial)
C. Ms. Jean E. Halvorson

Mailing Address 26 Fay Rd.
Box 81

City State Zip Code
Woods Hole MA 02543

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

Name of Employer Occupation
Retired Retired R.N.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2011
Transaction ID : 3132774

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5135.00

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 2452 |
| | <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. Joy Hamby | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2011 Transaction ID : 3125874 |
| Mailing Address 2240 Willivee Pl | | Amount of Each Receipt this Period 10.00 |
| City Decatur | State GA | Zip Code 30033 |
| 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. Mrs. Barbara R. R. Hamilton | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2011 Transaction ID : 3119383 |
| Mailing Address 2884 Treasure Island Rd. | | Amount of Each Receipt this Period 25.00 |
| City Port St. Lucie | State FL | Zip Code 34952 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 215.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Midori M. Hamilton | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 Transaction ID : 3134646 |
| Mailing Address 2622 Marylhurst Dr. | | Amount of Each Receipt this Period 300.00 |
| City West Linn | State OR | Zip Code 97068 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation retired | |
| 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).....▶ | 335.00 |
| 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 298 OF 2452 |
| | <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. Tom Hamilton
Full Name (Last, First, Middle Initial)

Mailing Address 1356 Oak View Cir., Apt. 154

| | | |
|----------------------|-------------|-------------------|
| City Rohnert Park | State CA | Zip Code 94928 |
|----------------------|-------------|-------------------|

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 ▼
450.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 22 | / | 2011 |

Transaction ID : 3134148

Amount of Each Receipt this Period
200.00

B. Ms. Mary S. Hamilton
Full Name (Last, First, Middle Initial)

Mailing Address 6 Granite Drive

| | | |
|---------------------|-------------|-------------------|
| City Cedar Grove | State NJ | Zip Code 07009 |
|---------------------|-------------|-------------------|

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 ▼
2500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 09 | / | 2011 |

Transaction ID : 3125206

Amount of Each Receipt this Period
1000.00

C. Ms. Sarah J. Hamilton
Full Name (Last, First, Middle Initial)

Mailing Address 3000 San Patricia Pl. NW

| | | |
|---------------------|-------------|-------------------|
| City Albuquerque | State NM | Zip Code 87107 |
|---------------------|-------------|-------------------|

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

| | |
|-----------------------------------|-------------------------------|
| Name of Employer Kenney Agency | Occupation Insurance agent |
|-----------------------------------|-------------------------------|

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 |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3134521

Amount of Each Receipt this Period
125.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1325.00 |
| 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 299 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Ms. Marian J Hamilton | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 7 Ross Road | | Transaction ID : 3129003 |
| City Alameda | State CA | Zip Code 94502 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 400.00 | |
| Name of Employer None | Occupation REQUESTED | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 480.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Ms. Laura W. Hamilton | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2011 |
| Mailing Address 707 Randolph Ave. | | Transaction ID : 3119398 |
| City Huntsville | State AL | Zip Code 35801 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50.00 | |
| Name of Employer State of Alabama | Occupation Circuit Judge | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 650.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Donna Hamilton | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 1126 E Sunset Hill Rd | | Transaction ID : 3129651 |
| City Shelton | State WA | Zip Code 98584 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 30.00 | |
| Name of Employer US Department of State | Occupation Ret5ired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 440.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 120.00 |
| 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 300 OF 2452 |
| | <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. Donna Hamilton
Full Name (Last, First, Middle Initial)
Mailing Address 1126 E Sunset Hill Rd
City Shelton State WA Zip Code 98584
FEC ID number of contributing federal political committee. **C**
Name of Employer US Department of State Occupation Retired
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **440.00**

Date of Receipt
12 / 29 / 2011
Transaction ID : 3138293
Amount of Each Receipt this Period
300.00

B. Ms. Wendolyn H H. Hamlin-Smith
Full Name (Last, First, Middle Initial)
Mailing Address 100 BURNT BRIDGE WAY APT H Apt H
City Yorktown State VA Zip Code 23692
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 **600.00**

Date of Receipt
12 / 24 / 2011
Transaction ID : 3135434
Amount of Each Receipt this Period
100.00

C. Virgie Hammas
Full Name (Last, First, Middle Initial)
Mailing Address 202 W. Greenway Blvd
City Falls Church State VA Zip Code 22046
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
12 / 04 / 2011
Transaction ID : 3119998
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... **150.00**
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 301 OF 2452 |
| | <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. Jeanne Hammer
Full Name (Last, First, Middle Initial)
Mailing Address 1329 Lancaster Ave.
City Syracuse State NY Zip Code 13210
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 ▼ 202.11

Date of Receipt
12 / 05 / 2011
Transaction ID : 3121647
Amount of Each Receipt this Period
50.00

B. Ms. Ann Hammond
Full Name (Last, First, Middle Initial)
Mailing Address 720 Ouilmette Ln
City Wilmette State IL Zip Code 60091
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
12 / 15 / 2011
Transaction ID : 3129843
Amount of Each Receipt this Period
250.00

c. Dr. S Katharine S. Hammond
Full Name (Last, First, Middle Initial)
Mailing Address 735 Gelston Place
City El Cerrito State CA Zip Code 94530
FEC ID number of contributing federal political committee. **C**
Name of Employer University of California, Berkeley Occupation professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt
12 / 31 / 2011
Transaction ID : 3139067
Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 330.00
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 302 OF 2452
(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. Eileen Hamper
 Full Name (Last, First, Middle Initial)
 Mailing Address 1300 Burrows Rd.
 City Campbell State CA Zip Code 95008
 Date of Receipt: 12 / 15 / 2011
Transaction ID : 3128710
 Amount of Each Receipt this Period: 17.00
 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: 208.00

B. Ms. Eileen Hamper
 Full Name (Last, First, Middle Initial)
 Mailing Address 1300 Burrows Rd.
 City Campbell State CA Zip Code 95008
 Date of Receipt: 12 / 27 / 2011
Transaction ID : 3134509
 Amount of Each Receipt this Period: 25.00
 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: 208.00

C. Dr. Janice G Hamrin
 Full Name (Last, First, Middle Initial)
 Mailing Address 359 Molino Ave
 City Mill Valley State CA Zip Code 94941
 Date of Receipt: 12 / 20 / 2011
Transaction ID : 3133356
 Amount of Each Receipt this Period: 50.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: HMW International Occupation: Energy Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 275.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 92.00
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 303 OF 2452
(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. Joseph R. Hanc
 Full Name (Last, First, Middle Initial)
 Mailing Address 3011 W. George Street Unit # 1
 Unit # 1
 City Chicago State IL Zip Code 60618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer cvs/caremark Occupation project leader
 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
 12 / 15 / 2011
Transaction ID : 3129348
 Amount of Each Receipt this Period
 25.00

B. Ms. Marcia Handelman
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 Clinton Place
 City Troy State NY Zip Code 12180
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011
Transaction ID : 3121111
 Amount of Each Receipt this Period
 50.00

C. Ms. Robin Hanes
 Full Name (Last, First, Middle Initial)
 Mailing Address 1709 East Market St.
 City Charlottesville State VA Zip Code 22902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist/Homemaker
 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
 12 / 27 / 2011
Transaction ID : 3134379
 Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 2452 |
| | <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. Bruce Hann
Full Name (Last, First, Middle Initial)

Mailing Address 1241 Olive St

City State Zip Code
Denver CO 80220

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 ▼
325.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2011

Transaction ID : 3130258

Amount of Each Receipt this Period
100.00

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

Mailing Address 75 Central St.

City State Zip Code
S. Weymouth MA 02190

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

Name of Employer Occupation
self entrepreneur

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
12 / 20 / 2011

Transaction ID : 3132777

Amount of Each Receipt this Period
150.00

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

Mailing Address 75 Central St.

City State Zip Code
S. Weymouth MA 02190

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

Name of Employer Occupation
self entrepreneur

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
12 / 28 / 2011

Transaction ID : 3136441

Amount of Each Receipt this Period
50.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 300.00 |
| 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 305 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Ms. Margaret Hannay | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2011 |
| Mailing Address 1 Hannay Road | | Transaction ID : 3132776 |
| City Westerlo | State NY | Zip Code 12193 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Siena College | Occupation Professor of English | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 950.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr. Kenneth Hannsgen | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 1006 Oak Pointe Ct. | | Transaction ID : 3132190 |
| City Blacksburg | State VA | Zip Code 24060 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 115.00 |
| Name of Employer n/a | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 290.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Jane Hanson | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2011 |
| Mailing Address 249 West 29th Street Apt. 8S | | Transaction ID : 3130260 |
| City New York | State NY | Zip Code 10001 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Milbank Tweed | Occupation Lawyer | |
| 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).....▶ | 865.00 |
| 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 306 OF 2452 |
| | <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. Lynne Hardey

Mailing Address 620 Wesley Commons Dr.

| | | |
|-----------------------|-------------|-------------------|
| City Golden Valley | State MN | Zip Code 55427 |
|-----------------------|-------------|-------------------|

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

| | |
|---|--------------------------------|
| Name of Employer RBC Wealth Management | Occupation Trust Consultant |
|---|--------------------------------|

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
 12 / 17 / 2011
Transaction ID : 3130262

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Ms. Jean Harlow

Mailing Address 517 Little River Way

| | | |
|--------------------|-------------|-------------------|
| City Sacramento | State CA | Zip Code 95831 |
|--------------------|-------------|-------------------|

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

| | |
|--------------------------|------------------|
| Name of Employer Self | Occupation RN |
|--------------------------|------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128948

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Ms. Cristina Harmon

Mailing Address 544 Parkview Dr

| | | |
|---------------------------|-------------|-------------------|
| City Steamboat Springs | State CO | Zip Code 80487 |
|---------------------------|-------------|-------------------|

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

| | |
|--------------------------------|--------------------------|
| Name of Employer CPH-EA Inc | Occupation Accountant |
|--------------------------------|--------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
229.61

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : 3123755

Amount of Each Receipt this Period
10.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 130.00 |
| 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 307 OF 2452 |
| | <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. Cristina Harmon
Full Name (Last, First, Middle Initial)
Mailing Address 544 Parkview Dr
City Steamboat Springs State CO Zip Code 80487
FEC ID number of contributing federal political committee. **C**
Name of Employer CPH-EA Inc Occupation Accountant
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **229.61**

Date of Receipt **12 / 29 / 2011**
Transaction ID : 3138245
Amount of Each Receipt this Period **25.00**

B. Mrs. Nancy Harmon
Full Name (Last, First, Middle Initial)
Mailing Address 7343 Ridgepoint Drive, #909
City Cincinnati State OH Zip Code 45230
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 **275.00**

Date of Receipt **12 / 15 / 2011**
Transaction ID : 3129323
Amount of Each Receipt this Period **25.00**

C. Charles Harriman
Full Name (Last, First, Middle Initial)
Mailing Address Po box 510260
City Key Colony Beach State FL Zip Code 33051
FEC ID number of contributing federal political committee. **C**
Name of Employer ubs fi Occupation Investments
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **425.00**

Date of Receipt **12 / 20 / 2011**
Transaction ID : 3132780
Amount of Each Receipt this Period **150.00**

SUBTOTAL of Receipts This Page (optional)..... **200.00**
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 308 OF 2452 |
| | <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 N. Harrington
Full Name (Last, First, Middle Initial)

Mailing Address 750 Lovell Avenue

City Mill Valley State CA Zip Code 94941

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

Name of Employer Self Occupation anesthesiologist

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
 12 / 16 / 2011

Transaction ID : 3130830

Amount of Each Receipt this Period
 100.00

B. Ms. Julie Schwam Schwam Harris
Full Name (Last, First, Middle Initial)

Mailing Address 1208 Pine Street

City New Orleans State LA Zip Code 70118

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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011

Transaction ID : 3137889

Amount of Each Receipt this Period
 75.00

C. Ms. Marnie Harris
Full Name (Last, First, Middle Initial)

Mailing Address 3109 W Pioneer Road

City Mequon State WI Zip Code 53097

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

Name of Employer Harris McCall & Associates (Self) Occupation Business Owner

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
 12 / 13 / 2011

Transaction ID : 3126766

Amount of Each Receipt this Period
 10.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 185.00 |
| 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 309 OF 2452 |
| | <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. Marnie Harris
Full Name (Last, First, Middle Initial)

Mailing Address 3109 W Pioneer Road

City Mequon State WI Zip Code 53097

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

Name of Employer Harris McCall & Associates (Self) Occupation Business Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
12 / 25 / 2011
Transaction ID : 3135700

Amount of Each Receipt this Period
200.00

B. Ms. Angelique R. Harris
Full Name (Last, First, Middle Initial)

Mailing Address 7209 Flower Tuft Court

City Springfield State VA Zip Code 22153

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 ▼ 700.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3128252

Amount of Each Receipt this Period
100.00

C. Ms. Ann S S. Harris
Full Name (Last, First, Middle Initial)

Mailing Address 1315 Denniston Street

City Pittsburgh State PA Zip Code 15217

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

Name of Employer University of Pittsburgh Occupation Professor of Art His

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
12 / 23 / 2011
Transaction ID : 3135436

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00

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 310 OF 2452 |
| | <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. Lynn Harris Adelson | | Date of Receipt |
| Mailing Address 349 Sixth Avenue, #4 | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Brooklyn | NY | 11215 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3129510 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="240.00"/> |
| Name of Employer | Occupation | |
| self | writer | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="240.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Eliza Harrison | | Date of Receipt |
| Mailing Address 125 Miller Ave | | <input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Rumford | RI | 02916 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3130264 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="100.00"/> |
| Name of Employer | Occupation | |
| n/a | retired | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="235.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mr. Curtis Harrison | | Date of Receipt |
| Mailing Address 20260 Carol Ln | | <input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Saratoga | CA | 95070 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3123988 |
| 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 | |
| n/a | Retired | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="4000.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="1120.00"/> |
| 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 311 OF 2452 |
| | <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. Mr. Frederick Harrison
 Full Name (Last, First, Middle Initial)
 Mailing Address 9348 Cherry Hill Rd Apt 407
 City College Park State MD Zip Code 20740
 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
 12 / 05 / 2011
Transaction ID : 3121637
 Amount of Each Receipt this Period
 100.00

B. Ms. Sarah Harrison
 Full Name (Last, First, Middle Initial)
 Mailing Address 1255 S. Maple Rd Apt. 101
 City Ann Arbor State MI Zip Code 48103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNIVERSITY OF MICHIGAN Occupation ADMIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.11

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 25 / 2011
Transaction ID : 3135721
 Amount of Each Receipt this Period
 20.00

C. Tomeka R Hart
 Full Name (Last, First, Middle Initial)
 Mailing Address 1309 Goodbar Ave
 City Memphis State TN Zip Code 38104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Memphis Urban League Occupation President & CEO
 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
 12 / 11 / 2011
Transaction ID : 3125919
 Amount of Each Receipt this Period
 25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 145.00 |
| 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 312 OF 2452 |
| | <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. Nancy G. Harter
Full Name (Last, First, Middle Initial)

Mailing Address 201 S Glenwood Avenue

City Columbia State MO Zip Code 65203

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

Name of Employer self Occupation consultant

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
 12 / 15 / 2011

Transaction ID : 3128253

Amount of Each Receipt this Period
 200.00

B. Ms. Marilyn A. Hartig
Full Name (Last, First, Middle Initial)

Mailing Address 76 S Peak Trl

City Boulder State CO Zip Code 80302

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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3131974

Amount of Each Receipt this Period
 400.00

C. Ms. Lynda Hartley
Full Name (Last, First, Middle Initial)

Mailing Address 6900 W. Fremont St.

City Boise State ID Zip Code 83704

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 ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123777

Amount of Each Receipt this Period
 15.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 615.00 |
| 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 313 OF 2452 |
| | <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. Miss. Carol E Hartman
 Full Name (Last, First, Middle Initial)
 Mailing Address 626 N. Dearborn St. #111
 City Redlands State CA Zip Code 92374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation RN-retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129102
 Amount of Each Receipt this Period
 150.00

B. Miss. Carol E Hartman
 Full Name (Last, First, Middle Initial)
 Mailing Address 626 N. Dearborn St. #111
 City Redlands State CA Zip Code 92374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation RN-retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3137515
 Amount of Each Receipt this Period
 50.00

C. Ms. Nancy Hartman
 Full Name (Last, First, Middle Initial)
 Mailing Address 388 Prince Street
 City Northumberland State PA Zip Code 17857
 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
 12 / 15 / 2011
Transaction ID : 3128678
 Amount of Each Receipt this Period
 25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 225.00 |
| 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 314 OF 2452
(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 Hartnett
 Full Name (Last, First, Middle Initial)
 Mailing Address 40 Thurston Pond Road
 City State Zip Code
 Deerfield NH 03037
 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 ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128588
 Amount of Each Receipt this Period
 20.00

B. Ms. Evelyn Hartsell
 Full Name (Last, First, Middle Initial)
 Mailing Address 1787 Stearns Road
 City State Zip Code
 Paradise CA 95969
 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 ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128946
 Amount of Each Receipt this Period
 20.00

C. Ms. Anne Harvey
 Full Name (Last, First, Middle Initial)
 Mailing Address 2242 Lawton Drive
 City State Zip Code
 Lemon Grove CA 91945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 San Diego State University Professor Emeritus
 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
 12 / 15 / 2011
Transaction ID : 3129175
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
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 315 OF 2452 |
| | <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. Jayne Harwell
Full Name (Last, First, Middle Initial)

Mailing Address 23 Whitehall Circle

City Marshallton State DE Zip Code 19808

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

Name of Employer Amerisource Bergen Occupation ACCOUNTANT

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
 12 / 11 / 2011

Transaction ID : 3125897

Amount of Each Receipt this Period
15.00

B. Mr. David W. Haseltine
Full Name (Last, First, Middle Initial)

Mailing Address 146 East 46TH Street Room 2F Room 2F

City New York State NY Zip Code 10017

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

Name of Employer Self Occupation Bookkeeper

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
 12 / 15 / 2011

Transaction ID : 3129526

Amount of Each Receipt this Period
25.00

C. Ms. Judy Haselton
Full Name (Last, First, Middle Initial)

Mailing Address 60 E 8th St., Apt. 26E Apt. 26E

City New York State NY Zip Code 10003

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

Name of Employer Harmony Financial Advisors Occupation Financial Life Plann

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
 12 / 28 / 2011

Transaction ID : 3135187

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... **1040.00**

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 316 OF 2452 |
| | <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. Carol Joy Joy Haupt | | Date of Receipt |
| Mailing Address 854 Rue d la Paix Apt B10 | | <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2011"/> |
| City Cincinnati | State OH | Zip Code 45220 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3135465 |
| Name of Employer n/a | | Amount of Each Receipt this Period |
| Occupation retired | | <input type="text" value="200.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| <input type="text" value="255.00"/> | | |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) B. Dr. Lynn E Hauser | | Date of Receipt |
| Mailing Address 950 N Michigan Ave Apt 5403 | | <input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2011"/> |
| City Chicago | State IL | Zip Code 60611 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3138223 |
| Name of Employer n/a | | Amount of Each Receipt this Period |
| Occupation retired | | <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="2500.00"/> | | |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Ezra Hausman | | Date of Receipt |
| Mailing Address 77 Kaposia Street | | <input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2011"/> |
| City Auburndale | State MA | Zip Code 02466 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3130274 |
| Name of Employer Synapse Energy Economics | | Amount of Each Receipt this Period |
| Occupation Consultant | | <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="260.00"/> | | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="1270.00"/> |
| 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 317 OF 2452 |
| | (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. Jeaneane Havstad | | | Date of Receipt |
| Mailing Address 46928 Brooks Ln. | | | <input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3131453 |
| Plymouth | MI | 48170 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="100.00"/> |
| Name of Employer | Occupation | | |
| n/a | retired | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="275.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Dawna Hawksworth | | | Date of Receipt |
| Mailing Address 1140 South 9th St | | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3135978 |
| San Jose | CA | 95112 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="25.00"/> |
| Name of Employer | Occupation | | |
| n/a | retired | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="225.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Kay Haxton | | | Date of Receipt |
| Mailing Address 2036sharon road | | | <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3128093 |
| Winter Park | FL | 32789 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="150.00"/> |
| Name of Employer | Occupation | | |
| n/a | Retired | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="325.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="275.00"/> |
| 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 318 OF 2452 |
| | <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. Stephanie Hayutin
Full Name (Last, First, Middle Initial)

Mailing Address 745 25th St

City Santa Monica State CA Zip Code 90402

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

Name of Employer n/a Occupation retired psychologist

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
 12 / 17 / 2011

Transaction ID : 3130926

Amount of Each Receipt this Period
350.00

B. Mrs. Evan J. Hazard
Full Name (Last, First, Middle Initial)

Mailing Address 3119 Apple Treet Court NW

City Bemidji State MN Zip Code 56601

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 ▼ **525.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3128900

Amount of Each Receipt this Period
45.00

C. Ms. Andrea Hazlitt
Full Name (Last, First, Middle Initial)

Mailing Address 110 Wedgewood

City Lake Jackson State TX Zip Code 77566

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 ▼ **335.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011

Transaction ID : 3130278

Amount of Each Receipt this Period
100.00

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 495.00 |
| 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 319 OF 2452 |
| | <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. Anna Heath-Delaney
Full Name (Last, First, Middle Initial)

Mailing Address 755 Everett St

City El Cerrito State CA Zip Code 94530

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

Name of Employer Kaiser Division of Research Occupation research administrat

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129568

Amount of Each Receipt this Period
200.00

B. Dr. Britt Hedman
Full Name (Last, First, Middle Initial)

Mailing Address 110 Peter Couatts Cir.

City Stanford State CA Zip Code 94305

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

Name of Employer standford university Occupation PROFESSOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011

Transaction ID : 3134446

Amount of Each Receipt this Period
250.00

C. Ms. Dana R. Hees
Full Name (Last, First, Middle Initial)

Mailing Address 3409 Hunter Circle

City Lexington State KY Zip Code 40502

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

Name of Employer Self Occupation homemaker

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
 12 / 30 / 2011

Transaction ID : 3138591

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)..... **570.00**

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 320 OF 2452
(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 A. Hefner
 Full Name (Last, First, Middle Initial)
 Mailing Address 715 N Price Rd
 City Olivette State MO Zip Code 63132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Saint Louis University Occupation Genetic Counselor
 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
 12 / 24 / 2011
Transaction ID : 3135467
 Amount of Each Receipt this Period
 250.00

B. Mr. Steve Hegeman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1339 Old Oak Lane
 City Naples State FL Zip Code 34110
 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 ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 3126188
 Amount of Each Receipt this Period
 250.00

C. Ms. Nikki Heidepriem
 Full Name (Last, First, Middle Initial)
 Mailing Address 5404 Edgemoor Ln
 City Bethesda State MD Zip Code 20814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Heidepriem & Associates Occupation consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3125784
 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 321 OF 2452 |
| | <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. CleoBell Heiple-Tice | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 1615 N 2ND Ave | | Transaction ID : 3129000 |
| City Upland | State CA | Zip Code 91784 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 25.00 |
| Name of Employer n/a | Occupation Retired | |
| 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) B. Ms. Janet R. Heller | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address 2719 Pfitzer Ave. | | Transaction ID : 3134531 |
| City Portage | State MI | Zip Code 49024 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 500.00 |
| Name of Employer Western Michigan University | Occupation Professor | |
| 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. Dorothy O. Helly | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 91 Central Park W | | Transaction ID : 3129440 |
| City New York | State NY | Zip Code 10023 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 20.00 |
| 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 ▼ 240.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 545.00 |
| 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 322 OF 2452 |
| | <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. Alice Helm
Full Name (Last, First, Middle Initial)
Mailing Address 11906 Kling Street

| | | |
|-------------------------|-------------|-------------------|
| City North Hollywood | State CA | Zip Code 91607 |
|-------------------------|-------------|-------------------|

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 ▼
2957.74

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 07 | / | 2011 |

Transaction ID : 3123334

Amount of Each Receipt this Period
250.00

B. Ms. Alice Helm
Full Name (Last, First, Middle Initial)
Mailing Address 11906 Kling Street

| | | |
|-------------------------|-------------|-------------------|
| City North Hollywood | State CA | Zip Code 91607 |
|-------------------------|-------------|-------------------|

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 ▼
2957.74

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 19 | / | 2011 |

Transaction ID : 3131854

Amount of Each Receipt this Period
1000.00

C. Michael Henderson
Full Name (Last, First, Middle Initial)
Mailing Address 3026 Riverview Road

| | | |
|------------------|-------------|-------------------|
| City Lawrence | State KS | Zip Code 66049 |
|------------------|-------------|-------------------|

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 ▼
260.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129626

Amount of Each Receipt this Period
50.00

| | |
|--|---------|
| 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: (check only one) | PAGE 323 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | | |
|---|-------------|-----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Kathlyn Hendricks | | | Date of Receipt 12 / 20 / 2011 Transaction ID : 3132784 |
| Mailing Address 104 Cuyama Road | | | Amount of Each Receipt this Period 150.00 |
| City Ojai | State CA | Zip Code 93023 | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 285.00 |
| Name of Employer The Hendricks Institute, Inc. | | Occupation CEO and Director of | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------|-----------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Ann Chase Hendrie | | | Date of Receipt 12 / 15 / 2011 Transaction ID : 3128348 |
| Mailing Address 2 Warren's Pt. Rd. | | | Amount of Each Receipt this Period 100.00 |
| City Little Compton | State RI | Zip Code 02837 | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 300.00 |
| Name of Employer n/a | | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------|-----------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Ann Chase Hendrie | | | Date of Receipt 12 / 28 / 2011 Transaction ID : 3136479 |
| Mailing Address 2 Warren's Pt. Rd. | | | Amount of Each Receipt this Period 25.00 |
| City Little Compton | State RI | Zip Code 02837 | |
| FEC ID number of contributing federal political committee. C | | | Aggregate Year-to-Date ▼ 300.00 |
| Name of Employer n/a | | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 275.00 |
| 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 324 OF 2452 |
| | <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 M. Henner | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2011 |
| Mailing Address 470 Talbot Avenue | | Transaction ID : 3125428 |
| City Pacifica | State CA | Zip Code 94044 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 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 ▼ 1500.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Mr. Robert R. Henry | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2011 |
| Mailing Address 480 Saxony Rd. | | Transaction ID : 3131435 |
| City Encinitas | State CA | Zip Code 92024 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50.00 | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 315.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Ms. Janice J. Herdey | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address PO Box 3126 | | Transaction ID : 3128883 |
| City Idyllwild | State CA | Zip Code 92549 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 15.00 | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 220.00 | |

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 1065.00 |
| 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 325 OF 2452 |
| | <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. Barbara Herman
 Full Name (Last, First, Middle Initial)
 Mailing Address 468 N Flores St
 City Los Angeles State CA Zip Code 90048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 UCLA Professor
 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
 12 / 21 / 2011
Transaction ID : 3133840
 Amount of Each Receipt this Period
 200.00

B. Ms. Valerie J. Herr
 Full Name (Last, First, Middle Initial)
 Mailing Address 1541 Hawthorne Terrace
 City Berkeley State CA Zip Code 94708
 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 ▼
 205.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2011
Transaction ID : 3133991
 Amount of Each Receipt this Period
 50.00

C. Ms. Lois Herrmann
 Full Name (Last, First, Middle Initial)
 Mailing Address 530 Calle Corvo
 City Santa Fe State NM Zip Code 87501
 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 ▼
 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3123961
 Amount of Each Receipt this Period
 35.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 285.00 |
| 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 326 OF 2452 |
| | <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. Edith C. Herron | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 3129066 |
| Mailing Address 36 Park Avenue | | Amount of Each Receipt this Period 300.00 |
| City Rehoboth Beach | State DE | Zip Code 19971 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| 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) B. Ms. Dede Herst | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2011 Transaction ID : 3138199 |
| Mailing Address 2305 Paseo Dorado | | Amount of Each Receipt this Period 15.00 |
| City La Jolla | State CA | Zip Code 92037 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self | Occupation social worker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Helen Hess | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 Transaction ID : 3132226 |
| Mailing Address 2845 N Baker St. | | Amount of Each Receipt this Period 75.00 |
| City Bakersfield | State CA | Zip Code 93305 |
| 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 ▼ 232.50 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 115.00 |
| 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 327 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Hillary Hess
 Full Name (Last, First, Middle Initial)
 Mailing Address 415 N Norwood St
 City Arlington State VA Zip Code 22203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U S Dept Of Commerce Occupation Policy Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3128757
 Amount of Each Receipt this Period
 25.00

B. Ms. Renata Hesse
 Full Name (Last, First, Middle Initial)
 Mailing Address 1307 P Street NW
 City Washington State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wilson Sonsini Gree Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 12 / 13 / 2011
Transaction ID : 3126297
 Amount of Each Receipt this Period
 250.00

C. Mr. David Heuvelman
 Full Name (Last, First, Middle Initial)
 Mailing Address 539 WARWICK LANE
 City Venice State FL Zip Code 34293
 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 ▼ 300.00

Date of Receipt
 12 / 07 / 2011
Transaction ID : 3123552
 Amount of Each Receipt this Period
 25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 300.00 |
| 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 328 OF 2452 |
| | <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. Mrs. D Highiet
 Full Name (Last, First, Middle Initial)
 Mailing Address 3113 Grey Eagle Drive
 City Walnut Creek State CA Zip Code 94595
 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 ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129179
 Amount of Each Receipt this Period
 300.00

B. Ms. Shirley A. Hignet
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Four Wheel Dr.
 City Mars State PA Zip Code 16046
 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
 12 / 22 / 2011
Transaction ID : 3134071
 Amount of Each Receipt this Period
 75.00

C. Dr. Eugene A. Hildreth
 Full Name (Last, First, Middle Initial)
 Mailing Address 2000 Cambridge Ave., Apt. 129 Apt. 129
 City Reading State PA Zip Code 19610
 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 ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132053
 Amount of Each Receipt this Period
 300.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 405.00 |
| 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 329 OF 2452 |
| | <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. Rev. Susan Hill
Full Name (Last, First, Middle Initial)
Mailing Address 1284 N. Abrego Dr.
City Green Valley State AZ Zip Code 85614
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 ▼ 300.00

Date of Receipt
12 / 29 / 2011
Transaction ID : 3138284
Amount of Each Receipt this Period
150.00

B. Janis Hill
Full Name (Last, First, Middle Initial)
Mailing Address 2844 Windsor Oaks Trace
City Marietta State GA Zip Code 30066
FEC ID number of contributing federal political committee. **C**
Name of Employer cobb county schools Occupation teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt
12 / 04 / 2011
Transaction ID : 3119759
Amount of Each Receipt this Period
20.00

C. Ms. Milagros Hill
Full Name (Last, First, Middle Initial)
Mailing Address 2501 9th Rd S Apt 468
City Arlington State VA Zip Code 22204
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
12 / 07 / 2011
Transaction ID : 3123439
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00
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 330 OF 2452 |
| | <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. Debbie L. Hill
Full Name (Last, First, Middle Initial)

Mailing Address 800 Eastowne Dr., Ste. 106

| | | |
|---------------------|-------------|-------------------|
| City Chapel Hill | State NC | Zip Code 27514 |
|---------------------|-------------|-------------------|

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

| | |
|--------------------------|-------------------------------|
| Name of Employer Self | Occupation Psychotherapist |
|--------------------------|-------------------------------|

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 |
| 12 | / | 19 | / | 2011 |

Transaction ID : 3131829

Amount of Each Receipt this Period
125.00

B. Ms. Karen E Hillerman
Full Name (Last, First, Middle Initial)

Mailing Address 10301 Yates Dr N

| | | |
|-----------------------|-------------|-------------------|
| City Brooklyn Park | State MN | Zip Code 55443 |
|-----------------------|-------------|-------------------|

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

| | |
|--|---|
| Name of Employer Thrivent Financial for Lutherans | Occupation Computer Programmer / Analyst |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129409

Amount of Each Receipt this Period
20.00

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

Mailing Address 4719 Sedgwick Street, N.W.

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20016 |
|--------------------|-------------|-------------------|

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

| | |
|--|----------------------------|
| Name of Employer World Trade Organization | Occupation lawyer/judge |
|--|----------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 04 | / | 2011 |

Transaction ID : 3119760

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 245.00 |
| 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 331 OF 2452 |
| | <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. Gwendolen Hines

Mailing Address 2753 Stratford Ave

| | | |
|-----------------|-------------|-------------------|
| City Lincoln | State NE | Zip Code 68502 |
|-----------------|-------------|-------------------|

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

| | |
|--|------------------------------------|
| Name of Employer University of Nebraska | Occupation mathematics professo |
|--|------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131226

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Ms. Louise C. Hipsh

Mailing Address 12809 Cedar St.

| | | |
|-----------------|-------------|-------------------|
| City Leawood | State KS | Zip Code 66209 |
|-----------------|-------------|-------------------|

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

| | |
|--------------------------|------------------------|
| Name of Employer self | Occupation Attorney |
|--------------------------|------------------------|

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
 12 / 27 / 2011
Transaction ID : 3134422

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. Ms. Carole A Hires

Mailing Address 255 James Street

| | | |
|--------------------|-------------|-------------------|
| City Morristown | State NJ | Zip Code 07960 |
|--------------------|-------------|-------------------|

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

| | |
|--|---------------------|
| Name of Employer The Hires Wellness Center, LLC | Occupation Owner |
|--|---------------------|

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
 12 / 15 / 2011
Transaction ID : 3129113

Amount of Each Receipt this Period
25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 345.00 |
| 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 332 OF 2452 |
| | <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. Elizabeth Hirsch
Full Name (Last, First, Middle Initial)

Mailing Address 182 Grand Street

City New York State NY Zip Code 10013

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

Name of Employer Educational Alliance Occupation Educator

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
 12 / 28 / 2011

Transaction ID : 3136492

Amount of Each Receipt this Period
 500.00

B. Ms. Jeanne B B. Hirshfield
Full Name (Last, First, Middle Initial)

Mailing Address 36468 Sandsal Circle

City Rancho Mirage State CA Zip Code 92270

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

Name of Employer River Vale NJ Bd of Ed Occupation retired teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3128717

Amount of Each Receipt this Period
 35.00

C. Ms. Dona Hoard
Full Name (Last, First, Middle Initial)

Mailing Address 5412 Proctor Ave.

City Oakland State CA Zip Code 94618

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

Name of Employer self Occupation Management Consultan

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
 12 / 20 / 2011

Transaction ID : 3133371

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 785.00

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 333 OF 2452 |
| | <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. Marie Hobart
 Full Name (Last, First, Middle Initial)
 Mailing Address 24 Brattle St.
 City Worcester State MA Zip Code 01606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UMMHC Occupation physician
 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
 12 / 19 / 2011
Transaction ID : 3132214
 Amount of Each Receipt this Period
150.00

B. Mr. Thomas Hocking
 Full Name (Last, First, Middle Initial)
 Mailing Address 2304 E Tuscany Way
 City Appleton State WI Zip Code 54913
 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 **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134800
 Amount of Each Receipt this Period
80.00

C. Dr. Elizabeth Hodapp
 Full Name (Last, First, Middle Initial)
 Mailing Address 245 E Rivo Alto Dr
 City Miami Beach State FL Zip Code 33139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer S. Fla. Eye Assoc Occupation Doctor
 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
 12 / 09 / 2011
Transaction ID : 3125203
 Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)..... **430.00**
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 334 OF 2452 |
| | <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 Hodge
Full Name (Last, First, Middle Initial)
Mailing Address 368 Edgewood Ave.
City Teaneck State NJ Zip Code 07666
FEC ID number of contributing federal political committee. **C**
Name of Employer Columbia University, NY State Occupation Professor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **275.00**

Date of Receipt **12 / 27 / 2011**
Transaction ID : 3134428
Amount of Each Receipt this Period **150.00**

B. Ms. Mary S. Hodges
Full Name (Last, First, Middle Initial)
Mailing Address 1219 N Boston Ave
City Deland State FL Zip Code 32724
FEC ID number of contributing federal political committee. **C**
Name of Employer semco Occupation owner
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **206.00**

Date of Receipt **12 / 13 / 2011**
Transaction ID : 3126245
Amount of Each Receipt this Period **106.00**

C. Ms. Patricia Hodgson
Full Name (Last, First, Middle Initial)
Mailing Address 107 Paddock Drive
City Newark State DE Zip Code 19711
FEC ID number of contributing federal political committee. **C**
Name of Employer Colonial School District Occupation Teacher
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **240.00**

Date of Receipt **12 / 15 / 2011**
Transaction ID : 3128764
Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **276.00**
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 335 OF 2452 |
| | <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. Susan Hoffman
 Full Name (Last, First, Middle Initial)
 Mailing Address 13603 Cozy Pl.
 City Tampa State FL Zip Code 33625
 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 M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131591
 Amount of Each Receipt this Period
100.00

B. Ms. Alexandra Hoffman
 Full Name (Last, First, Middle Initial)
 Mailing Address 501 East 87TH Street, # 9G
 City New York State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Freelance Writer/Edi
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128689
 Amount of Each Receipt this Period
20.00

C. Mr. Patrick Hogan
 Full Name (Last, First, Middle Initial)
 Mailing Address 13 Hillcrest St.
 City Lake Placid State FL Zip Code 33852
 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 **2000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011
Transaction ID : 3133645
 Amount of Each Receipt this Period
1000.00

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1120.00 |
| 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 336 OF 2452
(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. Bertha M. Hohle

Mailing Address 150 Quebec St., Apt. 328W

City State Zip Code
Denver CO 80230

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 ▼
525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3133355

Amount of Each Receipt this Period
125.00

Full Name (Last, First, Middle Initial)
B. Mr. Jerome L. Holder

Mailing Address 14060 N Biltmore Dr.

City State Zip Code
Oro Valley AZ 85755

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 ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011

Transaction ID : 3131558

Amount of Each Receipt this Period
55.00

Full Name (Last, First, Middle Initial)
C. Ms. Venetia Holland

Mailing Address 526 Allegheny Ave

City State Zip Code
Baltimore MD 21204

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

Name of Employer Occupation
Coldwell Banker REALTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 25 / 2011

Transaction ID : 3135638

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

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 337 OF 2452 |
| | <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. Margaret E. Holland
Full Name (Last, First, Middle Initial)
Mailing Address 42350 NW Blossom Lane

| | | |
|---------------|-------------|-------------------|
| City Banks | State OR | Zip Code 97106 |
|---------------|-------------|-------------------|

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

| | |
|--|------------------------------------|
| Name of Employer DOT&PF State of Alaska | Occupation retired from State o |
|--|------------------------------------|

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 |
| 12 | / | 18 | / | 2011 |

Transaction ID : 3130293

Amount of Each Receipt this Period
100.00

B. Ms. Margaret E. Holland
Full Name (Last, First, Middle Initial)
Mailing Address 42350 NW Blossom Lane

| | | |
|---------------|-------------|-------------------|
| City Banks | State OR | Zip Code 97106 |
|---------------|-------------|-------------------|

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

| | |
|--|------------------------------------|
| Name of Employer DOT&PF State of Alaska | Occupation retired from State o |
|--|------------------------------------|

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 |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3135912

Amount of Each Receipt this Period
200.00

C. Mrs. James F. F. Holland M.D.
Full Name (Last, First, Middle Initial)
Mailing Address Mount Sinai MedicalCenter

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10029 |
|------------------|-------------|-------------------|

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

| | |
|--|---------------------------|
| Name of Employer Mount Sinai Medical Center | Occupation Physiciaian |
|--|---------------------------|

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 |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3130959

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 400.00 |
| 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 338 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|--|---------------------------|---|
| Full Name (Last, First, Middle Initial) A. Mrs. James F. F. Holland M.D. | | Date of Receipt 12 / 28 / 2011 Transaction ID : 3137489 |
| Mailing Address Mount Sinai MedicalCenter | | Amount of Each Receipt this Period 50.00 |
| City New York | State NY | |
| Zip Code 10029 | | Aggregate Year-to-Date ▼ 275.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Mount Sinai Medical Center | Occupation Physiciaian | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|---------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Linda Holland | | Date of Receipt 12 / 30 / 2011 Transaction ID : 3138428 |
| Mailing Address 617 Gillespie Ave | | Amount of Each Receipt this Period 100.00 |
| City Sarasota | State FL | |
| Zip Code 34236 | | Aggregate Year-to-Date ▼ 400.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self | Occupation Real Estate | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|-----------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Joanne M. Hollingsworth | | Date of Receipt 12 / 27 / 2011 Transaction ID : 3134606 |
| Mailing Address 607 Gould Ter. | | Amount of Each Receipt this Period 200.00 |
| City Hermosa Beach | State CA | |
| Zip Code 90254 | | Aggregate Year-to-Date ▼ 425.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 350.00 |
| 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 339 OF 2452 |
| | <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. Kevin G. Hollis
Full Name (Last, First, Middle Initial)
Mailing Address 1338 Ridgeway Ave.
City New Albany State IN Zip Code 47150
FEC ID number of contributing federal political committee. **C**
Name of Employer Heal Thyself Occupation Physician
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2500.00

Date of Receipt 12 / 27 / 2011
Transaction ID : 3134625
Amount of Each Receipt this Period 2500.00

B. Jackie Holloway
Full Name (Last, First, Middle Initial)
Mailing Address 102 Artesia Dr
City Oak Ridge State TN Zip Code 37830
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 12 / 06 / 2011
Transaction ID : 3121914
Amount of Each Receipt this Period 150.00

C. Ms. Peggy Holman
Full Name (Last, First, Middle Initial)
Mailing Address 15347 SE 49TH PLACE
City Bellevue State WA Zip Code 98006
FEC ID number of contributing federal political committee. **C**
Name of Employer The Open Circle Company Occupation Management consultant
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 450.00

Date of Receipt 12 / 14 / 2011
Transaction ID : 3127570
Amount of Each Receipt this Period 100.00

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 340 OF 2452
(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. Janice Holsbo
 Full Name (Last, First, Middle Initial)
 Mailing Address 655 Main St Apt 304
 City Edmonds State WA Zip Code 98020
 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 M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : 3123307
 Amount of Each Receipt this Period
 250.00

B. Ms. Sandra Holt
 Full Name (Last, First, Middle Initial)
 Mailing Address 1141 S 350 E
 City Kouts State IN Zip Code 46347
 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
 12 / 21 / 2011
Transaction ID : 3133668
 Amount of Each Receipt this Period
 100.00

C. Sue Holtz
 Full Name (Last, First, Middle Initial)
 Mailing Address 3355 Heidelberg Dr
 City Boulder State CO Zip Code 80305
 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 ▼ 208.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119238
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
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 341 OF 2452 |
| | <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. Sue Holtz | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2011 |
| Mailing Address 3355 Heidelberg Dr | | Transaction ID : 3126670 |
| City Boulder | State CO | Zip Code 80305 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 15.00 |
| Name of Employer none | Occupation none | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 208.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Sue Holtz | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 3355 Heidelberg Dr | | Transaction ID : 3127573 |
| City Boulder | State CO | Zip Code 80305 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 30.00 |
| Name of Employer none | Occupation none | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 208.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Judy G. Honig | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2011 |
| Mailing Address 9911 De Paul Drive | | Transaction ID : 3138168 |
| City Bethesda | State MD | Zip Code 20817 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Lapine Group | Occupation consultant | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 4400.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1045.00 |
| 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 342 OF 2452
(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. Lynn M Hooker
 Full Name (Last, First, Middle Initial)
 Mailing Address 1003 South Palmer Ave.
 City State Zip Code
 Bloomington IN 47401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Indiana University Professor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 218.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129256
 Amount of Each Receipt this Period
 16.50

B. Mr. John Hopson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1940 Camino Mora
 City State Zip Code
 Los Alamos NM 87544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Los Alamos National Laboratory Scientist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 910.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011
Transaction ID : 3133843
 Amount of Each Receipt this Period
 50.00

C. Mr. John Hopson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1940 Camino Mora
 City State Zip Code
 Los Alamos NM 87544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Los Alamos National Laboratory Scientist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 910.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2011
Transaction ID : 3135794
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 96.50
TOTAL This Period (last page this line 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 343 OF 2452
(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. Chiyo Horiuchi
 Full Name (Last, First, Middle Initial)
 Mailing Address 80 S Quebec Way
 City State Zip Code
 Denver CO 80230
 Date of Receipt: 12 / 13 / 2011
Transaction ID : 3126467
 Amount of Each Receipt this Period: 450.00
 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. Mrs. Jean L Hormell
 Full Name (Last, First, Middle Initial)
 Mailing Address 5815 Springtown Rd
 City State Zip Code
 Watsontown PA 17777
 Date of Receipt: 12 / 11 / 2011
Transaction ID : 3125888
 Amount of Each Receipt this Period: 20.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: retired Occupation: educator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date: 225.00

C. Ms. Janice Horn
 Full Name (Last, First, Middle Initial)
 Mailing Address 32 Barber Street
 City State Zip Code
 Clarion PA 16214
 Date of Receipt: 12 / 15 / 2011
Transaction ID : 3129187
 Amount of Each Receipt this Period: 20.00
 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: 390.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 490.00
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 344 OF 2452 |
| | (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. Vicki Kufcic Horne | | Date of Receipt |
| Mailing Address 852 Dorseyville Rd. | | <input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2011"/> |
| City | State | Transaction ID : 3133615 |
| Pittsburgh | PA | Amount of Each Receipt this Period |
| Zip Code | | <input type="text" value="250.00"/> |
| 15238 | | |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| Self | Attorney | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="450.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Janet R. Horowitz | | Date of Receipt |
| Mailing Address 333 E. 30th Steet Apt 8 M | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City | State | Transaction ID : 3136002 |
| New York | NY | Amount of Each Receipt this Period |
| Zip Code | | <input type="text" value="20.00"/> |
| 10016 | | |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| n/a | RETIRED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="222.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Elaine Horowitz | | Date of Receipt |
| Mailing Address 214 N Oakhurst Dr | | <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2011"/> |
| City | State | Transaction ID : 3131294 |
| Beverly Hills | CA | Amount of Each Receipt this Period |
| Zip Code | | <input type="text" value="25.00"/> |
| 90210 | | |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| REQUESTED | REQUESTED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="225.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="295.00"/> |
| 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 345 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Jill Horowitz
 Full Name (Last, First, Middle Initial)
 Mailing Address 107 Alvarado Rd
 City Berkeley State CA Zip Code 94705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Psychoanalyst and Ps
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt
 12 / 30 / 2011
Transaction ID : 3138429
 Amount of Each Receipt this Period
100.00

B. Mr. Chris Horwitz
 Full Name (Last, First, Middle Initial)
 Mailing Address 2200 Beechwood Blvd
 City Pittsburgh State PA Zip Code 15217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer electrogrip Occupation ceo
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt
 12 / 13 / 2011
Transaction ID : 3126719
 Amount of Each Receipt this Period
25.00

C. Ms. Jane Houston
 Full Name (Last, First, Middle Initial)
 Mailing Address 1207 W. Fort Street, Apt. 111
 City Boise State ID Zip Code 83702
 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 **420.00**

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3129476
 Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... **160.00**
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 346 OF 2452 |
| | <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. Dr. Ann Hoven
 Full Name (Last, First, Middle Initial)
 Mailing Address 16428 84th Ave N
 City State Zip Code
 Maple Grove MN 55311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The Hartford Physician
 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
 12 / 27 / 2011
Transaction ID : 3134478
 Amount of Each Receipt this Period
 500.00

B. Mr. Richard Hover
 Full Name (Last, First, Middle Initial)
 Mailing Address 2920 Alt 19
 City State Zip Code
 Dunedin FL 34698
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 US DoD retired engineer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2011
Transaction ID : 3135795
 Amount of Each Receipt this Period
 20.00

C. Ms. Lucille Howard
 Full Name (Last, First, Middle Initial)
 Mailing Address 1290 E.Peachtree ave
 City State Zip Code
 Woodville GA 30669
 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 ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3127579
 Amount of Each Receipt this Period
 35.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 555.00 |
| 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 347 OF 2452 |
| | <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. Jo Ann Ann Howe
Full Name (Last, First, Middle Initial)
Mailing Address 3811 39th St NW #D-88

| | | |
|---|------------------------------------|-------------------|
| City Washington | State DC | Zip Code 20016 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer retired registered nurse | Occupation none | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 210.00 | |

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 14 / 2011
Transaction ID : 3127580

Amount of Each Receipt this Period
50.00

B. Ms. Jo Ann Ann Howe
Full Name (Last, First, Middle Initial)
Mailing Address 3811 39th St NW #D-88

| | | |
|---|------------------------------------|-------------------|
| City Washington | State DC | Zip Code 20016 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer retired registered nurse | Occupation none | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 210.00 | |

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2011
Transaction ID : 3136522

Amount of Each Receipt this Period
25.00

C. Ms. B.J. Hoyt
Full Name (Last, First, Middle Initial)
Mailing Address 4304 Ulrich Way

| | | |
|---|------------------------------------|-------------------|
| City Sacramento | State CA | Zip Code 95822 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 650.00 | |

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 16 / 2011
Transaction ID : 3130846

Amount of Each Receipt this Period
250.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 325.00 |
| 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 348 OF 2452 |
| | <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 Hoyt
Full Name (Last, First, Middle Initial)

Mailing Address 2331 Garden Highway

City Sacramento State CA Zip Code 95833

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

Name of Employer Up North Interests Occupation Planner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 10 / 2011
Transaction ID : 3125903

Amount of Each Receipt this Period 1000.00

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

Mailing Address 463 Portland Avenue

City Rollinsford State NH Zip Code 03869

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

Name of Employer Univ of New Hampshire Occupation Mgr Information Syst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 07 / 2011
Transaction ID : 3123556

Amount of Each Receipt this Period 10.00

C. Ms. Suzanne M Huard
Full Name (Last, First, Middle Initial)

Mailing Address 463 Portland Avenue

City Rollinsford State NH Zip Code 03869

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

Name of Employer Univ of New Hampshire Occupation Mgr Information Syst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 17 / 2011
Transaction ID : 3130950

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional).....▶ 1020.00

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 349 OF 2452 |
| | <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. Unison Hubbard | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2011 |
| Mailing Address 4220 Southpark Bluff Drive | | Transaction ID : 3126995 |
| City Anchorage | State AK | Zip Code 99516 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer n/a | Occupation Retired | |
| 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. Sandra Hughes | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 |
| Mailing Address 100 Central Avenue #612 | | Transaction ID : 3135481 |
| City Sarasota | | State FL |
| Zip Code 34236 | | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self | Occupation Governance Consultan | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 950.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Jean Hulbert | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 2820 Kelly Circle | | Transaction ID : 3129205 |
| City Manhattan | | State KS |
| Zip Code 66502 | | Amount of Each Receipt this Period 19.00 |
| 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 ▼ 228.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 369.00 |
| 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 350 OF 2452 |
| | <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. Anne Humphreys
 Full Name (Last, First, Middle Initial)
 Mailing Address 125 W 76TH St
 City New York State NY Zip Code 10023
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128788
 Amount of Each Receipt this Period
 20.00

B. Ms. Betty Cochran Hunt
 Full Name (Last, First, Middle Initial)
 Mailing Address 117 Shady Lane Court
 City Roseville State CA Zip Code 95747
 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 ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : 3138189
 Amount of Each Receipt this Period
 20.00

C. Mr. Richard Hunter
 Full Name (Last, First, Middle Initial)
 Mailing Address 1310 Birch Lane
 City Wilmington State DE Zip Code 19809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation
 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
 12 / 15 / 2011
Transaction ID : 3129353
 Amount of Each Receipt this Period
 25.00

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 65.00 |
| 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 351 OF 2452
(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 K. Hunter
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 CINNAMON LANE
 City State Zip Code
 RPV CA 90275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 self artist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 570.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3135914
 Amount of Each Receipt this Period
 200.00

B. Ms. Marianne K. Hunter
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 CINNAMON LANE
 City State Zip Code
 RPV CA 90275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 self artist
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 570.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3138851
 Amount of Each Receipt this Period
 250.00

C. Ms. Virginia K. Huschke
 Full Name (Last, First, Middle Initial)
 Mailing Address 2720 E 4th St., Apt. 514
 City State Zip Code
 National City CA 91950
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired EDUCATOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131897
 Amount of Each Receipt this Period
 500.00

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 352 OF 2452 |
| | <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. Joan Lee Husted
Full Name (Last, First, Middle Initial)

Mailing Address 1615 Wilder Ave. Apt. 804

| | | |
|------------------|-------------|-------------------|
| City Honolulu | State HI | Zip Code 96822 |
|------------------|-------------|-------------------|

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 ▼
260.11

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 03 | / | 2011 |

Transaction ID : 3119931

Amount of Each Receipt this Period

| | | | | |
|-------|-------|-------|-------|-------|
| 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
|-------|-------|-------|-------|-------|

40.00

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

Mailing Address 128 Kirwans Landing La

| | | |
|-----------------|-------------|-------------------|
| City Chester | State MD | Zip Code 21619 |
|-----------------|-------------|-------------------|

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

| | |
|--------------------------|---------------------|
| Name of Employer AAMC | Occupation Nurse |
|--------------------------|---------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129561

Amount of Each Receipt this Period

| | | | | |
|-------|-------|-------|-------|-------|
| 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
|-------|-------|-------|-------|-------|

20.00

C. Ms. Maryann Hutchison
Full Name (Last, First, Middle Initial)

Mailing Address 464 35TH Street

| | | |
|-------------------------|-------------|-------------------|
| City Manhattan Beach | State CA | Zip Code 90266 |
|-------------------------|-------------|-------------------|

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

| | |
|-----------------------------|-----------------------|
| Name of Employer Refused | Occupation Refused |
|-----------------------------|-----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129249

Amount of Each Receipt this Period

| | | | | |
|-------|-------|-------|-------|-------|
| 90.00 | 90.00 | 90.00 | 90.00 | 90.00 |
|-------|-------|-------|-------|-------|

30.00

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 90.00 |
| 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 353 OF 2452 |
| | (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

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Kevin Huvane | | Date of Receipt |
| Mailing Address 2000 Avenue of the Stars | | <input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Los Angeles | CA | 90067 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3124313 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="1000.00"/> |
| Name of Employer | Occupation | |
| CAA | Partner/Managing Dir | |
| 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. Beal V. Hyde | | Date of Receipt |
| Mailing Address 4218 Wake Robin Dr | | <input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Shelburne | VT | 05482 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3134146 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="650.00"/> |
| Name of Employer | Occupation | |
| REQUESTED | REQUESTED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="1150.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Eve Ilsen | | Date of Receipt |
| Mailing Address 1720 Lehigh St | | <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Boulder | CO | 80305 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3119242 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="36.00"/> |
| Name of Employer | Occupation | |
| Aleph Alliance for Jewish Renewal | rabbinic pastor | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="326.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="1686.00"/> |
| 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 354 OF 2452 |
| | <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. Eve Ilsen
Full Name (Last, First, Middle Initial)
Mailing Address 1720 Lehigh St
City Boulder State CO Zip Code 80305
FEC ID number of contributing federal political committee. **C**
Name of Employer Aleph Alliance for Jewish Renewal Occupation rabbinic pastor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **326.00**

Date of Receipt **12 / 24 / 2011**
Transaction ID : 3135483
Amount of Each Receipt this Period **10.00**

B. 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 Former employer, Indiana University Occupation Professor (retired)
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **400.00**

Date of Receipt **12 / 16 / 2011**
Transaction ID : 3130309
Amount of Each Receipt this Period **300.00**

C. Ms. Eileen Ireland
Full Name (Last, First, Middle Initial)
Mailing Address 722 5TH St.
City Las Vegas State NM Zip Code 87701
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 **1550.00**

Date of Receipt **12 / 16 / 2011**
Transaction ID : 3131484
Amount of Each Receipt this Period **300.00**

SUBTOTAL of Receipts This Page (optional)..... **610.00**
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 355 OF 2452 |
| | (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. Betty J. Irvine
Full Name (Last, First, Middle Initial)
Mailing Address 1901 E Windsor Dr.
City Bloomington State IN Zip Code 47401
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 ▼ 289.00

Date of Receipt 12 / 20 / 2011
Transaction ID : 3133495
Amount of Each Receipt this Period 120.00

B. Ms. Nancy H. Irwin
Full Name (Last, First, Middle Initial)
Mailing Address 135 Vista Monte
City Palm Desert State CA Zip Code 92260
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3131859
Amount of Each Receipt this Period 100.00

C. Ms. Jelica Isely
Full Name (Last, First, Middle Initial)
Mailing Address 8800 W.14th Ave
City Lakewood State CO Zip Code 80215
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 345.00

Date of Receipt 12 / 02 / 2011
Transaction ID : 3119765
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 320.00
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 356 OF 2452
(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. Jelica Isely
 Full Name (Last, First, Middle Initial)
 Mailing Address 8800 W.14th Ave
 City Lakewood State CO Zip Code 80215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2011
Transaction ID : 3130316
 Amount of Each Receipt this Period
 25.00

B. Ms. Ellen Ishkanian
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 93
 City South Wellfleet State MA Zip Code 02663
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131539
 Amount of Each Receipt this Period
 75.00

C. Mrs. Christine Jacobs
 Full Name (Last, First, Middle Initial)
 Mailing Address 553 Timber Lane
 City Devon State PA Zip Code 19333
 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 ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126764
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 357 OF 2452 |
| | <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. Ellen Jacobsen
Full Name (Last, First, Middle Initial)

Mailing Address 3604 S. Vine St

City Urbana State IL Zip Code 61802

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

Name of Employer self Occupation physician

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
 12 / 24 / 2011

Transaction ID : 3135618

Amount of Each Receipt this Period
75.00

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

Mailing Address 20 Fairfax Drive

City Wheeling State WV Zip Code 26003

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 ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011

Transaction ID : 3135995

Amount of Each Receipt this Period
25.00

C. Ms. Gail M. Jacobson
Full Name (Last, First, Middle Initial)

Mailing Address 156 Broad St

City San Luis Obispo State CA Zip Code 93405

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 ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3128611

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **125.00**

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 358 OF 2452 |
| | <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. Alice Wright Jacobus
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Ucalyptus Knoll
 City Mill Valley State CA Zip Code 94941
 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 ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2011
Transaction ID : 3135859
 Amount of Each Receipt this Period
 300.00

B. Ms. Angie Jaffers
 Full Name (Last, First, Middle Initial)
 Mailing Address 803 Red Bud Trail
 City Austin State TX Zip Code 78746
 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 ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129097
 Amount of Each Receipt this Period
 200.00

C. Ms. Joan D. D. James
 Full Name (Last, First, Middle Initial)
 Mailing Address 319 Woodcock Mtn Road
 City Salisbury Mills State NY Zip Code 12577
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133203
 Amount of Each Receipt this Period
 150.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 200.00 |
| 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 359 OF 2452 |
| | (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. Suzanne D. D. James | | Date of Receipt |
| Mailing Address 8463 Rice Lake Road | | <input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Maple Grove | MN | 55369 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3133654 |
| 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 | |
| Self-employed | Psychologist | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="775.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Meg Jandl | | Date of Receipt |
| Mailing Address 45 Mt Vernon Street | | <input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Boston | MA | 02108 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3125422 |
| 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) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Rosemarie Jeffery | | Date of Receipt |
| Mailing Address 209 N Crosscreek Dr | | <input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Muncie | IN | 47304 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3133714 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="125.00"/> |
| Name of Employer | Occupation | |
| REQUESTED | REQUESTED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="225.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="1125.00"/> |
| 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 360 OF 2452
(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. Andrea Jeffrey

Mailing Address 450 Kearney St

City State Zip Code
Denver CO 80220

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

Name of Employer Occupation
n/a home

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 25 / 2011
Transaction ID : 3135674

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
B. Mr. Norman W. Jenks

Mailing Address 2220 132nd Ave SE Apt A202

City State Zip Code
Bellevue WA 98005

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

Name of Employer Occupation
Microsoft Corp Software Tester

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
12 / 10 / 2011
Transaction ID : 3125886

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Ms. Gerry M. Jennings

Mailing Address 317 Fox Dr.

City State Zip Code
Great Falls MT 59404

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 ▼
345.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2011
Transaction ID : 3134082

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.00

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 361 OF 2452 |
| | <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. Joan C. Jewett | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2011 |
| Mailing Address 1421 Rolling Glen Dr #A | | Transaction ID : 3122795 |
| City Marcus Hook | State PA | Zip Code 19061 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25.00 | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1020.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Ms. Joan C. Jewett | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2011 |
| Mailing Address 1421 Rolling Glen Dr #A | | Transaction ID : 3130326 |
| City Marcus Hook | State PA | Zip Code 19061 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 60.00 | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1020.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Ms. Mary Ann Joca | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 915 Los Arboles Ave., N.W. | | Transaction ID : 3129297 |
| City Albuquerque | State NM | Zip Code 87107 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25.00 | |
| Name of Employer USDA | Occupation Attorney | |
| 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).....▶ | 110.00 |
| 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 362 OF 2452 |
| | <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. Mr. Paul Johanson
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 112
 City Oxford State IA Zip Code 52322
 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 **330.00**

Date of Receipt
 12 / 06 / 2011
Transaction ID : 3122895
 Amount of Each Receipt this Period
15.00

B. Ms. Sharon D. Johe
 Full Name (Last, First, Middle Initial)
 Mailing Address 278 Riverwood Drive
 City Lewisville State NC Zip Code 27023
 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 **360.00**

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3128586
 Amount of Each Receipt this Period
30.00

C. Mr. Calvin R. Johns
 Full Name (Last, First, Middle Initial)
 Mailing Address 5578 Sienna Cir.
 City Montgomery State AL Zip Code 36116
 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
 12 / 28 / 2011
Transaction ID : 3135112
 Amount of Each Receipt this Period
500.00

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 545.00 |
| 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 363 OF 2452 |
| | <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. E. L. Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 2221 Water St. SW

| | | |
|-----------------|-------------|-------------------|
| City Olympia | State WA | Zip Code 98501 |
|-----------------|-------------|-------------------|

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 ▼
215.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3134383

Amount of Each Receipt this Period
115.00

B. Mrs. Mary S. Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 28 Meadow Lks., Apt. 4

| | | |
|--------------------|-------------|-------------------|
| City Hightstown | State NJ | Zip Code 08520 |
|--------------------|-------------|-------------------|

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 ▼
475.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3131449

Amount of Each Receipt this Period
125.00

C. Ms. Jean E. Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 624 Sunset Circle

| | | |
|---------------|-------------|-------------------|
| City Ripon | State WI | Zip Code 54971 |
|---------------|-------------|-------------------|

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

| | |
|------------------------------------|-------------------------|
| Name of Employer LaSalle Clinic | Occupation Physician |
|------------------------------------|-------------------------|

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 |
| 12 | / | 09 | / | 2011 |

Transaction ID : 3125208

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 340.00 |
| 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 364 OF 2452 |
| | <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

| | | | |
|---|-------------------------------------|-------------------|---|
| Full Name (Last, First, Middle Initial) A. Ms. Lynne B Johnson | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2011 Transaction ID : 3121595 |
| Mailing Address 5517 Cedar Creek Dr. | | | Amount of Each Receipt this Period 250.00 |
| City Houston | State TX | Zip Code 77056 | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer NA | Occupation housewife | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1050.00 | | |

| | | | |
|---|------------------------------------|-------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Barbara Johnson | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 Transaction ID : 3135968 |
| Mailing Address 346 Coveview Court | | | Amount of Each Receipt this Period 15.00 |
| City Salem | State SC | Zip Code 29676 | |
| 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 ▼ 230.00 | | |

| | | | |
|---|------------------------------------|-------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Meghan Johnson | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2011 Transaction ID : 3126000 |
| Mailing Address 631 E St SE Apt. 1 | | | Amount of Each Receipt this Period 100.00 |
| City Washington | State DC | Zip Code 20003 | |
| 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 ▼ 800.00 | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 365.00 |
| 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 365 OF 2452 |
| | <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. Sally P. Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 4311 Wake Robin Dr.
 City Shelburne State VT Zip Code 05482
 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 ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3122113
 Amount of Each Receipt this Period
 300.00

B. Ms. Shirley T. Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 Driftwood Drive
 City Murray State KY Zip Code 42071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 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
 12 / 27 / 2011
Transaction ID : 3140596
 Amount of Each Receipt this Period
 25.00

C. Alwyn Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 4601 Rue Belle Mer
 City Sanibel State FL Zip Code 33957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 745.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129108
 Amount of Each Receipt this Period
 200.00

| | |
|--|--------|
| 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 366 OF 2452 |
| | <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. Jeffrey Jones
Full Name (Last, First, Middle Initial)

Mailing Address 1615 Cherokee Road

City Ann Arbor State MI Zip Code 48104

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

Name of Employer Perstorp Polyols, Inc. Occupation Chemist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011

Transaction ID : 3134201

Amount of Each Receipt this Period
 10.00

B. Ms. Evelyn Jones
Full Name (Last, First, Middle Initial)

Mailing Address 11600 100TH Avenue NE Apt. A8
Apt. A8

City Kirkland State WA Zip Code 98034

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 ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129270

Amount of Each Receipt this Period
 20.00

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

Mailing Address 1440 N Gatewood St Apt 25

City Wichita State KS Zip Code 67206

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 ▼ 281.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011

Transaction ID : 3121748

Amount of Each Receipt this Period
 81.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 111.00

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 367 OF 2452 |
| | <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. Leslie Jones
Full Name (Last, First, Middle Initial)

Mailing Address 17 Greene Street, Apt. 6

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10013 |
|------------------|-------------|-------------------|

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

| | |
|--------------------------|------------------------|
| Name of Employer self | Occupation attorney |
|--------------------------|------------------------|

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 |
| 12 | / | 17 | / | 2011 |

Transaction ID : 3130333

Amount of Each Receipt this Period
250.00

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

Mailing Address PO Box 186

| | | |
|-------------------|-------------|-------------------|
| City Riderwood | State MD | Zip Code 21139 |
|-------------------|-------------|-------------------|

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

| | |
|-----------------------------------|------------------------|
| Name of Employer Self-employed | Occupation Investor |
|-----------------------------------|------------------------|

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 |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3131494

Amount of Each Receipt this Period
100.00

C. Ms. Linda C C. Joplin
Full Name (Last, First, Middle Initial)

Mailing Address 13312 Edinburgh Dr

| | | |
|---------------------|-------------|-------------------|
| City Westminster | State CA | Zip Code 92683 |
|---------------------|-------------|-------------------|

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 ▼
265.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129572

Amount of Each Receipt this Period
20.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 370.00 |
| 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 368 OF 2452 |
| | <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. Linda C C. Joplin
 Full Name (Last, First, Middle Initial)
 Mailing Address 13312 Edinburgh Dr
 City Westminster State CA Zip Code 92683
 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 ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132502
 Amount of Each Receipt this Period
 125.00

B. Mrs. Carole Jordan
 Full Name (Last, First, Middle Initial)
 Mailing Address 4024 Grassmere Lane
 City Dallas State TX Zip Code 75205
 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 M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3125940
 Amount of Each Receipt this Period
 1000.00

C. Ms. Pamela Joseph
 Full Name (Last, First, Middle Initial)
 Mailing Address 407 Aspen Oak Dr
 City Aspen State CO Zip Code 81611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation artist
 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
 12 / 13 / 2011
Transaction ID : 3126753
 Amount of Each Receipt this Period
 1000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2125.00 |
| 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 369 OF 2452 |
| | <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. Mr. David Joslyn | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2011 |
| Mailing Address 18357 wakecrest dr. Ste 4100 | | Transaction ID : 3139101 |
| City malibu | State CA | Zip Code 90265 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 250.00 |
| Name of Employer McCullough Cambell and Lane | Occupation Lawyer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 210.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Carolyn Kacena | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2011 |
| Mailing Address 2305 Tahoe Ln | | Transaction ID : 3119352 |
| City Denton | State TX | Zip Code 76210 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 20.00 |
| Name of Employer n/a | Occupation Retired | |
| 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. Martha H. Kaemmer | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address 4 Crocus HI. | | Transaction ID : 3134698 |
| City Saint Paul | State MN | Zip Code 55102 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 500.00 |
| Name of Employer Self | Occupation Store owner | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 625.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 545.00 |
| 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 370 OF 2452
(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. Mary C. Kahl

Mailing Address 21 Dalton Court

City State Zip Code
Delmar NY 12054

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 ▼
245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : 3138244

Amount of Each Receipt this Period
35.00

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

Mailing Address 7701 Primavera Way

City State Zip Code
Carlsbad CA 92009

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 ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131012

Amount of Each Receipt this Period
10.00

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

Mailing Address 7701 Primavera Way

City State Zip Code
Carlsbad CA 92009

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 ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011
Transaction ID : 3133986

Amount of Each Receipt this Period
30.00

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

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 371 OF 2452 |
| | (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

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) A. Donna Kahn | | Date of Receipt |
| Mailing Address 726 Wolf Hill Rd | | <input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2011"/> |
| City Hillsdale | State NY | Zip Code 12529 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3120004 |
| Name of Employer JacksonLewis LLP | | Amount of Each Receipt this Period |
| Occupation Attorney | | <input type="text" value="75.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| <input type="text" value="975.00"/> | | |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Lorraine A. Kaimal | | Date of Receipt |
| Mailing Address 13 John Street | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City Hamilton | State NY | Zip Code 13346 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3128939 |
| Name of Employer n/a | | Amount of Each Receipt this Period |
| Occupation Retired | | <input type="text" value="15.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| <input type="text" value="280.00"/> | | |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) C. Buichi C. Kajiwara | | Date of Receipt |
| Mailing Address 1160 Singigwood Court Apt. 8 Apt. 8 | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City Walnut Creek | State CA | Zip Code 94595 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Transaction ID : 3129478 |
| Name of Employer REQUESTED | | Amount of Each Receipt this Period |
| Occupation REQUESTED | | <input type="text" value="17.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| <input type="text" value="204.00"/> | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="107.00"/> |
| 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 372 OF 2452
(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. Jean Kalina
 Full Name (Last, First, Middle Initial)
 Mailing Address 1424 E Taylor Lake Cir.
 City Livingston State TX Zip Code 77351
 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 ▼ 235.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133357
 Amount of Each Receipt this Period
 30.00

B. Mr. Eugene Kapaloski
 Full Name (Last, First, Middle Initial)
 Mailing Address 8882 Collingwood Dr.
 City Los Angeles State CA Zip Code 90069
 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 ▼ 1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3127614
 Amount of Each Receipt this Period
 250.00

C. Ms. Arlene Kaplan
 Full Name (Last, First, Middle Initial)
 Mailing Address 126-05 11 AVE
 City College Point State NY Zip Code 11356
 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 ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3136573
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1280.00
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 374 OF 2452
(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 Karp

Mailing Address 17 Camden Cir.

City State Zip Code
Delmar NY 12054

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 ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3135163

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
B. Ms. Stacey Karp

Mailing Address 37 Cartwright Dr

City State Zip Code
West Windsor NJ 08550

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 M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : 3134157

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
C. Ms. Anna Karreman

Mailing Address 404 Cheswick Place, Apt. 449

City State Zip Code
Bryn Mawr PA 19010

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 ▼
540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129461

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 320.00

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 375 OF 2452 |
| | <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. Dr. Ruth S Kasle
 Full Name (Last, First, Middle Initial)
 Mailing Address 524 Everett Court
 City Palo Alto State CA Zip Code 94301
 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 **750.00**

Date of Receipt
 12 / 20 / 2011
Transaction ID : 3133136
 Amount of Each Receipt this Period
500.00

B. Ms. Ann Kaslow
 Full Name (Last, First, Middle Initial)
 Mailing Address 1025 E 16TH Street
 City Brooklyn State NY Zip Code 11230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYC Bd. of Ed Occupation retired educator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **610.00**

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3128693
 Amount of Each Receipt this Period
50.00

C. Ms. Julianna Kasper
 Full Name (Last, First, Middle Initial)
 Mailing Address 1522 N. Camino Villa Bonita
 City Tucson State AZ Zip Code 85715
 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 **500.00**

Date of Receipt
 12 / 14 / 2011
Transaction ID : 3128155
 Amount of Each Receipt this Period
100.00

| | |
|---|---------------|
| 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 376 OF 2452 |
| | <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. Diana L. Kasson
 Full Name (Last, First, Middle Initial)
 Mailing Address 4060 Simms St
 City Wheat Ridge State CO Zip Code 80033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired/none Occupation retired/none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3127617
 Amount of Each Receipt this Period
 150.00

B. Ms. Mae E. Kastor
 Full Name (Last, First, Middle Initial)
 Mailing Address 2415 Boston Street
 City Baltimore State MD Zip Code 21224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Social Worker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128760
 Amount of Each Receipt this Period
 20.00

C. Ms. Joan Katz
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 Central Park West #9-P
 City New York State NY Zip Code 10025
 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 ▼ 241.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130340
 Amount of Each Receipt this Period
 21.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 191.00 |
| 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 377 OF 2452 |
| | <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. Deana E. Katz
Full Name (Last, First, Middle Initial)

Mailing Address 8325 E Pepper Tree Ln

City State Zip Code
Scottsdale AZ 85250

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 ▼
1600.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123352

Amount of Each Receipt this Period
250.00

B. Ms. Kim Kaufman
Full Name (Last, First, Middle Initial)

Mailing Address 15 W 81st St # 1e

City State Zip Code
New York NY 10024

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

Name of Employer Occupation
Trevor Day School Librarian

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 / 01 / 2011
Transaction ID : 3119135

Amount of Each Receipt this Period
250.00

C. Ms. Carolyn L L. Kaye
Full Name (Last, First, Middle Initial)

Mailing Address 5754 Rosebrook Drive

City State Zip Code
Troy MI 48085

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 ▼
240.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129089

Amount of Each Receipt this Period
20.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 520.00 |
| 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 378 OF 2452 |
| | <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. Marechal Kaytor
Full Name (Last, First, Middle Initial)

Mailing Address 1055 Harkness Street

City Manhattan Beach State CA Zip Code 90266

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 ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011

Transaction ID : 3122723

Amount of Each Receipt this Period
 10.00

B. Ms. Elizabeth 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 n/a 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
 12 / 16 / 2011

Transaction ID : 3130341

Amount of Each Receipt this Period
 250.00

C. M. Irvil Kear
Full Name (Last, First, Middle Initial)

Mailing Address 418 North Front Street

City Minersville State PA Zip Code 17954

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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011

Transaction ID : 3126788

Amount of Each Receipt this Period
 25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 285.00 |
| 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 379 OF 2452 |
| | <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. Rev. Deirdra R F Kearney
 Full Name (Last, First, Middle Initial)
 Mailing Address 331 East 29th Street #6-L
 City New York State NY Zip Code 10016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer One Spirit Interfaith Seminary Occupation Interfaith Minister
 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
 12 / 14 / 2011
Transaction ID : 3127618
 Amount of Each Receipt this Period
 150.00

B. Ms. Carol Keator
 Full Name (Last, First, Middle Initial)
 Mailing Address 1916 Gillespie St.
 City Santa Barbara State CA Zip Code 93101
 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 ▼ 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134887
 Amount of Each Receipt this Period
 125.00

C. Ms. Pamela Kedderis
 Full Name (Last, First, Middle Initial)
 Mailing Address 42 Northwoods Road
 City Farmington State CT Zip Code 06032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer noyb Occupation noyb
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2011
Transaction ID : 3130344
 Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 375.00 |
| 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 380 OF 2452
(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. Sandra Kehoe
 Full Name (Last, First, Middle Initial)
 Mailing Address 680 Canterbury Ln.
 City Cambria State CA Zip Code 93428
 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 ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119148
 Amount of Each Receipt this Period
 100.00

B. Dr. Ann Keim
 Full Name (Last, First, Middle Initial)
 Mailing Address 279 Locke Heights Rd.
 City Bangor State PA Zip Code 18013
 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 ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : 3134072
 Amount of Each Receipt this Period
 125.00

C. Mrs. Joanne G Keith
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Barrier Reef Dr
 City Corona Del Mar State CA Zip Code 92625
 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 ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129396
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
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 381 OF 2452 |
| | <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. Kathleen M Kelley
Full Name (Last, First, Middle Initial)
Mailing Address 5000 South Greenwood

| | | |
|-----------------|-------------|-------------------|
| City Chicago | State IL | Zip Code 60615 |
|-----------------|-------------|-------------------|

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

| | |
|-------------------------|----------------------------------|
| Name of Employer UIC | Occupation child psychiatrist |
|-------------------------|----------------------------------|

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 |
| 12 | / | 09 | / | 2011 |

Transaction ID : 3125912

Amount of Each Receipt this Period
20.00

B. Dr. Kathleen M Kelley
Full Name (Last, First, Middle Initial)
Mailing Address 5000 South Greenwood

| | | |
|-----------------|-------------|-------------------|
| City Chicago | State IL | Zip Code 60615 |
|-----------------|-------------|-------------------|

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

| | |
|-------------------------|----------------------------------|
| Name of Employer UIC | Occupation child psychiatrist |
|-------------------------|----------------------------------|

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 |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3131103

Amount of Each Receipt this Period
25.00

C. Ms. Marion K. Kellogg
Full Name (Last, First, Middle Initial)
Mailing Address 772 Brush Hill Road

| | | |
|---------------|-------------|-------------------|
| City Stowe | State VT | Zip Code 05672 |
|---------------|-------------|-------------------|

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

| | |
|-------------------------------|-------------------------|
| Name of Employer REQUESTED | Occupation Homemaker |
|-------------------------------|-------------------------|

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 |
| 12 | / | 08 | / | 2011 |

Transaction ID : 3123953

Amount of Each Receipt this Period
500.00

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 545.00 |
| 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 382 OF 2452
(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 Kelly
 Full Name (Last, First, Middle Initial)
 Mailing Address 1116 Pennway Dr
 City State Zip Code
 Lansing MI 48910
 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 ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : 3138242
 Amount of Each Receipt this Period
 15.00

B. Ms. Angela Kelsey
 Full Name (Last, First, Middle Initial)
 Mailing Address 1399 NE 104 St
 City State Zip Code
 Miami Shores FL 33138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 kelsey 95 corp real estate developo
 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
 12 / 05 / 2011
Transaction ID : 3120669
 Amount of Each Receipt this Period
 50.00

C. Mr. Dexter Kemp
 Full Name (Last, First, Middle Initial)
 Mailing Address 8102 Kempwood Dr.
 City State Zip Code
 Chesterfield VA 23832
 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 ▼
 361.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134442
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 383 OF 2452 |
| | <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. Jason Kemp | | Date of Receipt 12 / 17 / 2011 Transaction ID : 3130348 |
| Mailing Address 10 8th Avenue | | Amount of Each Receipt this Period 35.00 |
| City Waterford | State CT | Zip Code 06385 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer State of Connecticut | Occupation Judicial Branch Empl | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 535.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Ayse Manyas Kenmore | | Date of Receipt 12 / 13 / 2011 Transaction ID : 3126225 |
| Mailing Address 152 MONTAUK Highway | | Amount of Each Receipt this Period 120.12 |
| City East Hampton | State NY | Zip Code 11937 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer N/A | Occupation Retired Investor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 270.12 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Ayse Manyas Kenmore | | Date of Receipt 12 / 20 / 2011 Transaction ID : 3132828 |
| Mailing Address 152 MONTAUK Highway | | Amount of Each Receipt this Period 50.00 |
| City East Hampton | State NY | Zip Code 11937 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer N/A | Occupation Retired Investor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 270.12 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 205.12 |
| 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 384 OF 2452 |
| | <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. Jane M. Kennedy
Full Name (Last, First, Middle Initial)

Mailing Address 2608 Lotus Drive

City Tallahassee State FL Zip Code 32312

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 M / D D D / Y Y Y Y Y Y
 12 / 04 / 2011

Transaction ID : 3119871

Amount of Each Receipt this Period
250.00

B. Ms. Rebecca Kennedy
Full Name (Last, First, Middle Initial)

Mailing Address 275 Holly Hill Dr

City Columbus State NC Zip Code 28722

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 ▼
356.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123400

Amount of Each Receipt this Period
56.00

C. Ms. Jean Kepler
Full Name (Last, First, Middle Initial)

Mailing Address 1712 Warrentville St

City Las Vegas State NV Zip Code 89117

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 ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011

Transaction ID : 3119451

Amount of Each Receipt this Period
50.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 131.00 |
| 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 385 OF 2452 |
| | <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 Kervin
Full Name (Last, First, Middle Initial)
Mailing Address 1710 E 1140 N

| | | |
|---------------|-------------|-------------------|
| City Logan | State UT | Zip Code 84341 |
|---------------|-------------|-------------------|

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 ▼
345.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 05 | / | 2011 |

Transaction ID : 3120673

Amount of Each Receipt this Period
35.00

B. Ms. Claire B. Kessler
Full Name (Last, First, Middle Initial)
Mailing Address 288 tucker dr

| | | |
|---------------------|-------------|-------------------|
| City worthington | State OH | Zip Code 43085 |
|---------------------|-------------|-------------------|

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 ▼
225.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3130355

Amount of Each Receipt this Period
35.00

C. Mr. Stephen J. Kessler
Full Name (Last, First, Middle Initial)
Mailing Address 1612 Escalona Dr.

| | | |
|--------------------|-------------|-------------------|
| City Santa Cruz | State CA | Zip Code 95060 |
|--------------------|-------------|-------------------|

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 |
| 12 | / | 20 | / | 2011 |

Transaction ID : 3133505

Amount of Each Receipt this Period
200.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 270.00 |
| 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 386 OF 2452
(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. Norman C. Keul
 Full Name (Last, First, Middle Initial)
 Mailing Address 1025 Dacian Ave
 City Durham State NC Zip Code 27701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Duke University Occupation Dean
 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
 12 / 15 / 2011
Transaction ID : 3129136
 Amount of Each Receipt this Period
 70.00

B. Ms. Claire J Keyes
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 Higgins Rd.
 City Marblehead State MA Zip Code 01945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation retired professor
 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
 12 / 20 / 2011
Transaction ID : 3133130
 Amount of Each Receipt this Period
 100.00

C. Ms. Elizabeth Keys
 Full Name (Last, First, Middle Initial)
 Mailing Address 533 N Cuyler Ave.
 City Oak Park State IL Zip Code 60302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation Psychologist
 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
 12 / 19 / 2011
Transaction ID : 3132060
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 370.00
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 387 OF 2452
(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. Ellen W. Khokha

Mailing Address 7511 Cowan Ave

City Los Angeles State CA Zip Code 90045

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

Name of Employer: retired Occupation: Educator

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
 12 / 31 / 2011
Transaction ID : 3138876

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Ms. Dina Khoury

Mailing Address 6530 Sothoron 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 ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119463

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Ms. Floride B. Kidder

Mailing Address 12616 N Crescent

City Dunlap State IL Zip Code 61525

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

Name of Employer: Kidder Music Occupation: Business Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 3125396

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 388 OF 2452 |
| | <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. Raymond Killgrove
Full Name (Last, First, Middle Initial)

Mailing Address 2041 W Vista Way # 245

| | | |
|---------------|-------------|-------------------|
| City Vista | State CA | Zip Code 92083 |
|---------------|-------------|-------------------|

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 ▼
400.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 07 | / | 2011 |

Transaction ID : 3123395

Amount of Each Receipt this Period
400.00

B. Ms. Priscilla Kimboko
Full Name (Last, First, Middle Initial)

Mailing Address 4129 Kings Row Court NW

| | | |
|----------------|-------------|-------------------|
| City Walker | State MI | Zip Code 49534 |
|----------------|-------------|-------------------|

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

| | |
|---|-------------------------|
| Name of Employer Grand Valley State University | Occupation Professor |
|---|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 18 | / | 2011 |

Transaction ID : 3130360

Amount of Each Receipt this Period
30.00

C. Ms. Joan H. Kindred
Full Name (Last, First, Middle Initial)

Mailing Address 435 S Gulfstream Ave #1104

| | | |
|------------------|-------------|-------------------|
| City Sarasota | State FL | Zip Code 34236 |
|------------------|-------------|-------------------|

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 ▼
450.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128363

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 530.00 |
| 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 389 OF 2452 |
| | <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 L L. King
 Full Name (Last, First, Middle Initial)
 Mailing Address 10100 Cypress Cove Dr., Apt. 1 #106
 City Fort Myers State FL Zip Code 33908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation retired social worke
 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
 12 / 20 / 2011
Transaction ID : 3133349
 Amount of Each Receipt this Period
 250.00

B. Mr. Joseph King
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 51
 City Glen Flora State TX Zip Code 77443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer STPNOC Wadsworth TX Occupation Technical Writer
 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
 12 / 10 / 2011
Transaction ID : 3125896
 Amount of Each Receipt this Period
 25.00

C. Ms. Marjorie Kinsey
 Full Name (Last, First, Middle Initial)
 Mailing Address 719 W Washington St.
 City South Bend State IN Zip Code 46601
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129809
 Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 375.00 |
| 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 390 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Matilda Kirby-Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 2117 Wright Avenue
 City Greensboro State NC Zip Code 27403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Forsyth & Kirby-smith Designs, Inc. Designer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 202.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 25 / 2011
Transaction ID : 3135497
 Amount of Each Receipt this Period
 200.00

B. Mrs. Clay Kenan Kirk
 Full Name (Last, First, Middle Initial)
 Mailing Address 320 East 72nd St., Apt. 5C
 City New York State NY Zip Code 10021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self PRIVATE INVESTIGATOR
 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
 12 / 27 / 2011
Transaction ID : 3139240
 Amount of Each Receipt this Period
 500.00

C. Ms. Barbara Kirkley
 Full Name (Last, First, Middle Initial)
 Mailing Address 5577 High Point Rd
 City Solon State OH Zip Code 44139
 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 ▼
 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129668
 Amount of Each Receipt this Period
 35.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 555.00 |
| 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 391 OF 2452 |
| | (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. Mrs. Abigail Kirsch
Full Name (Last, First, Middle Initial)

Mailing Address 18 robin hood road

City Pound Ridge State NY Zip Code 10576

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

Name of Employer self Occupation caterer

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
 12 / 14 / 2011

Transaction ID : 3128082

Amount of Each Receipt this Period
 250.00

B. Dr. Enid V Klauber
Full Name (Last, First, Middle Initial)

Mailing Address 15705 mifflin ct

City Tampa State FL Zip Code 33647

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

Name of Employer bay area infectious disease associates Occupation physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011

Transaction ID : 3130996

Amount of Each Receipt this Period
 40.00

C. Ms. Karen Kleiler
Full Name (Last, First, Middle Initial)

Mailing Address 2394 SW 13th Ter.

City Boynton Beach State FL Zip Code 33426

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 ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011

Transaction ID : 3134773

Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 440.00

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 392 OF 2452 |
| | <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. Marilyn Klein | | Date of Receipt |
| Mailing Address 3360 Caminito Gandara | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| La Jolla | CA | 92037 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3134582 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="80.00"/> |
| Name of Employer | Occupation | |
| REQUESTED | REQUESTED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="205.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Kimiko Klein | | Date of Receipt |
| Mailing Address 403 Main Street, Unit 312 | | <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| San Francisco | CA | 94105 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3130367 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="20.00"/> |
| Name of Employer | Occupation | |
| State of California | Toxicologist | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="315.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Heather S. Kleiner | | Date of Receipt |
| Mailing Address 1061 Greystone Ln. W. | | <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Watkinsville | GA | 30677 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3128065 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="100.00"/> |
| Name of Employer | Occupation | |
| n/a | retired | |
| 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="200.00"/> |
| 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 393 OF 2452 |
| | <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. Alice A. Kleinhans | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2011 Transaction ID : 3121611 |
| Mailing Address 45 North St. | | Amount of Each Receipt this Period 200.00 |
| City Andover | State MA | Zip Code 01810 |
| FEC ID number of contributing federal political committee. C | Name of Employer Merrimack Valley | |
| Occupation Lawyer | | Aggregate Year-to-Date ▼ 450.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------|---|
| Full Name (Last, First, Middle Initial) B. Glenda Kline | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2011 Transaction ID : 3126672 |
| Mailing Address 11811 Far Edge Path | | Amount of Each Receipt this Period 100.00 |
| City Columbia | State MD | Zip Code 21044 |
| FEC ID number of contributing federal political committee. C | Name of Employer n/a | |
| Occupation Retired | | Aggregate Year-to-Date ▼ 335.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Amy Bender Klion | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 Transaction ID : 3125871 |
| Mailing Address 5927 Joyce Way | | Amount of Each Receipt this Period 1000.00 |
| City Dallas | State TX | Zip Code 75225 |
| FEC ID number of contributing federal political committee. C | Name of Employer REQUESTED | |
| Occupation REQUESTED | | Aggregate Year-to-Date ▼ 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|---------|
| 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: (check only one) | PAGE 394 OF 2452 |
| | <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. Jeanne Knight
Full Name (Last, First, Middle Initial)
Mailing Address 8605 Camino Osito Ne
City Albuquerque State NM Zip Code 87111
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 ▼ 470.12

Date of Receipt
12 / 13 / 2011
Transaction ID : 3126406
Amount of Each Receipt this Period
120.12

B. Dr. Kathleen Knight-Abowitz
Full Name (Last, First, Middle Initial)
Mailing Address 5 Bull Run Drive
City Oxford State OH Zip Code 45056
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 ▼ 360.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129489
Amount of Each Receipt this Period
30.00

C. Mr. Kerry Knorpp
Full Name (Last, First, Middle Initial)
Mailing Address 4 Windsor Rd
City Amarillo State TX Zip Code 79124
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 305.00

Date of Receipt
12 / 20 / 2011
Transaction ID : 3132838
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.12
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: PAGE 395 OF 2452
(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. Melburn Knox
 Full Name (Last, First, Middle Initial)
 Mailing Address 739 Clementina
 City San Francisco State CA Zip Code 94103
 Date of Receipt: 12 / 21 / 2011
Transaction ID : 3133856
 Amount of Each Receipt this Period: 515.00
 Aggregate Year-to-Date: 515.00
 Name of Employer self Occupation salesman
 Receipt For: Primary General Other (specify) C
 FEC ID number of contributing federal political committee.

B. Ms. Karen Koening
 Full Name (Last, First, Middle Initial)
 Mailing Address 5011 Windsor Park
 City Sarasota State FL Zip Code 34235
 Date of Receipt: 12 / 27 / 2011
Transaction ID : 3134629
 Amount of Each Receipt this Period: 245.00
 Aggregate Year-to-Date: 245.00
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) C
 FEC ID number of contributing federal political committee.

C. Ms. Bernice Koff
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 E Deshler Ave
 City Columbus State OH Zip Code 43206
 Date of Receipt: 12 / 12 / 2011
Transaction ID : 3125446
 Amount of Each Receipt this Period: 375.00
 Aggregate Year-to-Date: 375.00
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) C
 FEC ID number of contributing federal political committee.

SUBTOTAL of Receipts This Page (optional)..... ▶ 1135.00
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 396 OF 2452 |
| | <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. Laura Kofoid | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 3920 North Lake Shore Drive, A Apartment 7 | | Transaction ID : 3128687 |
| City Chicago | State IL | Zip Code 60613 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Laudi Vidni | Occupation business | |
| 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. Mr. Ronald Kohanski | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2011 |
| Mailing Address 6085 Covington Rd | | Transaction ID : 3126002 |
| City Columbia | State MD | Zip Code 21044 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| 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 ▼ 225.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Liz Kohlenberg | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2011 |
| Mailing Address 505 Salmon Lane SE | | Transaction ID : 3136610 |
| City olympia | State WA | Zip Code 98513 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| Name of Employer WA State Dept Social & Health Serv | Occupation Director of Research | |
| 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: PAGE 397 OF 2452
(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 M. Kohnen
 Full Name (Last, First, Middle Initial)
 Mailing Address 7303 Ione Court
 City State Zip Code
 Dublin CA 94568
 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 ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128620
 Amount of Each Receipt this Period
 40.00

B. Ms. Susan J. (Sue) Kohut
 Full Name (Last, First, Middle Initial)
 Mailing Address 4227 University Drive
 City State Zip Code
 Fairfax VA 22030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CBGR3, LLC President & CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 418.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119250
 Amount of Each Receipt this Period
 35.00

C. Ms. Susan J. (Sue) Kohut
 Full Name (Last, First, Middle Initial)
 Mailing Address 4227 University Drive
 City State Zip Code
 Fairfax VA 22030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CBGR3, LLC President & CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 418.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119251
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 398 OF 2452
(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 J. (Sue) Kohut
 Full Name (Last, First, Middle Initial)
 Mailing Address 4227 University Drive
 City State Zip Code
 Fairfax VA 22030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CBGR3, LLC President & CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 418.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126759
 Amount of Each Receipt this Period
 18.00

B. Ms. Susan J. (Sue) Kohut
 Full Name (Last, First, Middle Initial)
 Mailing Address 4227 University Drive
 City State Zip Code
 Fairfax VA 22030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CBGR3, LLC President & CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 418.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128365
 Amount of Each Receipt this Period
 50.00

C. Mr. Jerry A. Kolar
 Full Name (Last, First, Middle Initial)
 Mailing Address 15354 W Stearns School Rd.
 City State Zip Code
 Gurnee IL 60031
 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 ▼
 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131982
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 568.00
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 399 OF 2452 |
| | <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. Janet L Kolodner
Full Name (Last, First, Middle Initial)

Mailing Address 22 Pine Lake Drive

City Atlanta State GA Zip Code 30327

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

Name of Employer Georgia Inst. of Technology Occupation Professor

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
 12 / 15 / 2011

Transaction ID : 3129373

Amount of Each Receipt this Period
25.00

B. Ms. Susan C. Kolze
Full Name (Last, First, Middle Initial)

Mailing Address 5515 Woodlawn Blvd

City Minneapolis State MN Zip Code 55417

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

Name of Employer HealthPartners Occupation Systems Programmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2011

Transaction ID : 3131007

Amount of Each Receipt this Period
20.00

C. Ms. Delores M. Komar
Full Name (Last, First, Middle Initial)

Mailing Address 1534 Valley Drive

City Topanga State CA Zip Code 90290

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 ▼ **275.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011

Transaction ID : 3138187

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **195.00**

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 400 OF 2452 |
| | <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. Darlene Kordonowy
Full Name (Last, First, Middle Initial)

Mailing Address 15088 Sivertson Road NE

City Bainbridge Island State WA Zip Code 98110

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
12 / 08 / 2011
Transaction ID : 3124866

Amount of Each Receipt this Period
250.00

B. Ms. Ani Kortekaas
Full Name (Last, First, Middle Initial)

Mailing Address 10018 Westleigh Dr. SE

City Huntsville State AL Zip Code 35803

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 ▼ 500.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3132108

Amount of Each Receipt this Period
500.00

C. Mr. Richard F F Koseff
Full Name (Last, First, Middle Initial)

Mailing Address 109 W Main St # 205

City Durham State NC Zip Code 27701

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

Name of Employer BioMerieux, Inc. Occupation Director, HR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129139

Amount of Each Receipt this Period
20.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 545.00 |
| 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 401 OF 2452 |
| | <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. Christine L. Koski | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 13 / 2011 |
| Mailing Address 3525 Turtle Creek Blvd. # 19B | | Transaction ID : 3126997 |
| City Dallas | State TX | Zip Code 75219 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 1000.00 | |
| Name of Employer Koski Consulting Group | Occupation President | Aggregate Year-to-Date ▼ 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Ms. Anita L. Kostecki | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2011 |
| Mailing Address 57 Beechmont St | | Transaction ID : 3138892 |
| City Worcester | State MA | Zip Code 01609 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100.00 | |
| Name of Employer EMKHC Worcester MA | Occupation Physician | Aggregate Year-to-Date ▼ 700.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Mrs. Amanda Kowal Kenyon | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 6766 108th St Apt C6 | | Transaction ID : 3129292 |
| City Forest Hills | State NY | Zip Code 11375 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25.00 | |
| Name of Employer Stromberg Consulting | Occupation Management Consultant | Aggregate Year-to-Date ▼ 300.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1125.00 |
| 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 402 OF 2452 |
| | <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. Betty P. Kowaloff
 Full Name (Last, First, Middle Initial)
 Mailing Address 1261 Madison Avenue 3 South
 3 South
 City New York State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self employed Occupation designer
 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
 12 / 15 / 2011
Transaction ID : 3128978
 Amount of Each Receipt this Period
 50.00

B. Ms. Margaret J Krahenbuhl
 Full Name (Last, First, Middle Initial)
 Mailing Address 13200 Hugh Graham Rd NE
 City Albuquerque State NM Zip Code 87111
 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 ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128053
 Amount of Each Receipt this Period
 50.00

C. Ms. Laura D. Kranz
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 13
 City Whittier State NC Zip Code 28789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Unemployed Occupation Instructor
 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
 12 / 01 / 2011
Transaction ID : 3119155
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 403 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Ms. Lucy Krasnor | | Date of Receipt 12 / 15 / 2011 Transaction ID : 3129819 |
| Mailing Address 21 Spruce Street | | Amount of Each Receipt this Period 250.00 |
| City Riverside | State CT | Zip Code 06878 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Strategy Mortgage Corp | Occupation mortgage broker | |
| 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) B. Ms. Lucy Krasnor | | Date of Receipt 12 / 31 / 2011 Transaction ID : 3138894 |
| Mailing Address 21 Spruce Street | | Amount of Each Receipt this Period 100.00 |
| City Riverside | State CT | Zip Code 06878 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Strategy Mortgage Corp | Occupation mortgage broker | |
| 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. Randall Krause | | Date of Receipt 12 / 26 / 2011 Transaction ID : 3135799 |
| Mailing Address 4949 Genesta Avenue #415 | | Amount of Each Receipt this Period 100.00 |
| City Encino | State CA | Zip Code 91316 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self | Occupation Commercial real prop | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 234.00 | |

| | |
|--|--------|
| 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 404 OF 2452 |
| | <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. Mrs. Lois E. Krebs
 Full Name (Last, First, Middle Initial)
 Mailing Address 2751 Regency Oaks Blvd Apt R21
 Apt R211
 City Clearwater State FL Zip Code 33759
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129361
 Amount of Each Receipt this Period
 200.00

B. Ms. Christine E. Kreider
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 Pickerel Drive
 City Belgrade State ME Zip Code 04917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kreider Research and Consulting Occupation self-employed
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133245
 Amount of Each Receipt this Period
 100.00

C. Mr. Philip Krevitsky
 Full Name (Last, First, Middle Initial)
 Mailing Address 56 Roger Dr.
 City Port Washington State NY Zip Code 11050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ernst and Young Occupation CPA
 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
 12 / 19 / 2011
Transaction ID : 3131865
 Amount of Each Receipt this Period
 125.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 245.00 |
| 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 405 OF 2452 |
| | <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. Joseph Krueger

Mailing Address 4790 Irvine Blvd., Ste. 105
Apt 105

City Irvine State CA Zip Code 92620

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 ▼
276.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011

Transaction ID : 3134858

Amount of Each Receipt this Period
235.00

Full Name (Last, First, Middle Initial)
B. Dr. Susan M. Kubica

Mailing Address 122 Hammond Rd.

City Monterey State CA Zip Code 93940

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

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3133360

Amount of Each Receipt this Period
265.00

Full Name (Last, First, Middle Initial)
C. Ms. Kathryn Kuehl

Mailing Address 3400 Sullivan Court Apt.175

City Modesto State CA Zip Code 95356

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 ▼
480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3128606

Amount of Each Receipt this Period
40.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 540.00 |
| 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 406 OF 2452 |
| | <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. Estelle Kuhn | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address 60 W 68th St., Apt. 3B Apt 3B | | Transaction ID : 3134401 |
| City New York | State NY | Zip Code 10023 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1750.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Karen Kulikowski | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2011 |
| Mailing Address 1408 Lobo Ct NE | | Transaction ID : 3125983 |
| City Albuquerque | State NM | Zip Code 87106 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer self | Occupation nanny | |
| 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. Ruth I. Kunin | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 470 W End Ave., Apt. 6A Apartment 6A | | Transaction ID : 3131845 |
| City New York | State NY | Zip Code 10024 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2500.00 | |

| | |
|--|---------|
| 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 407 OF 2452
(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. Joan Kunzelmann

Mailing Address PO Box 832

City State Zip Code
Lake Wales FL 33859

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

Name of Employer Occupation
REQUESTED HOUSEWIFE

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
 12 / 19 / 2011
Transaction ID : 3132163

Amount of Each Receipt this Period
125.00

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

Mailing Address 4229 N Keystone Ave.

City State Zip Code
Chicago IL 60641

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 ▼
356.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134795

Amount of Each Receipt this Period
300.00

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

Mailing Address 13 old field rd

City State Zip Code
setauket NY 11733

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

Name of Employer Occupation
Self Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126348

Amount of Each Receipt this Period
220.12

SUBTOTAL of Receipts This Page (optional)..... ▶ 645.12

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: PAGE 408 OF 2452
(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. Verna Labrador
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 438
 City Reamstown State PA Zip Code 17567
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128720
 Amount of Each Receipt this Period
 25.00

B. Ms. Carol Ladewig
 Full Name (Last, First, Middle Initial)
 Mailing Address 3246 Ettie Street, #15
 City Oakland State CA Zip Code 94608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129522
 Amount of Each Receipt this Period
 20.00

C. Ms. Sherry Lahr
 Full Name (Last, First, Middle Initial)
 Mailing Address 4551 Bent Creek Pl
 City Grove City State OH Zip Code 43123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ashland University Occupation Retired College Prof
 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
 12 / 04 / 2011
Transaction ID : 3119930
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
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 409 OF 2452 |
| | <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. Carol Lakin
Full Name (Last, First, Middle Initial)
Mailing Address 918 Lizzie Lane
City Saint George State UT Zip Code 84790
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation Unemployed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 12 / 11 / 2011
Transaction ID : 3125828
Amount of Each Receipt this Period 20.00

B. Ms. Mary Lamb
Full Name (Last, First, Middle Initial)
Mailing Address 1907 East Blaine Street
City Seattle State WA Zip Code 98112
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 ▼ 240.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3128598
Amount of Each Receipt this Period 20.00

C. Ms. Catherine A. Lamboley
Full Name (Last, First, Middle Initial)
Mailing Address 2327 Seyborn St.
City Houston State TX Zip Code 77027
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation lawyer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 27 / 2011
Transaction ID : 3134574
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional).....▶ 1040.00
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 410 OF 2452 |
| | (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. Joyce LaMers
Full Name (Last, First, Middle Initial)
Mailing Address 2514 Greencastle Court
City Oxnard State CA Zip Code 93035
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 ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 15 / 2011
Transaction ID : 3129220
Amount of Each Receipt this Period
30.00

B. Ms. Marjorie Lamoreaux
Full Name (Last, First, Middle Initial)
Mailing Address 30 Topaz Way
City Sequim State WA Zip Code 98382
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation Retired Chem. Dep.RN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 245.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 18 / 2011
Transaction ID : 3131177
Amount of Each Receipt this Period
20.00

C. Ms. Faith Lamprey
Full Name (Last, First, Middle Initial)
Mailing Address 5 Old Nasonville Rd.
City Harrisville State RI Zip Code 02830
FEC ID number of contributing federal political committee. **C**
Name of Employer Aurora Technologies Occupation Computer Consultant
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
12 / 27 / 2011
Transaction ID : 3134486
Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 411 OF 2452 |
| | <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. Diana Lancaster
Full Name (Last, First, Middle Initial)
Mailing Address 1032 Hoffman

| | | |
|------------------|-------------|-------------------|
| City Petoskey | State MI | Zip Code 49770 |
|------------------|-------------|-------------------|

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 ▼ **425.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128550

Amount of Each Receipt this Period

| |
|-------|
| 40.00 |
|-------|

B. Ms. Diane Lander-Simon
Full Name (Last, First, Middle Initial)
Mailing Address 10960 Wilshire Blvd

| | | |
|------------------------|-------------|-------------------|
| City NKSF 5th Floor | State CA | Zip Code 90024 |
|------------------------|-------------|-------------------|

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

| | |
|--------------------------|----------------------|
| Name of Employer self | Occupation writer |
|--------------------------|----------------------|

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 |
| 12 | / | 21 | / | 2011 |

Transaction ID : 3133950

Amount of Each Receipt this Period

| |
|-------|
| 50.00 |
|-------|

C. Mr. William Landolfi
Full Name (Last, First, Middle Initial)
Mailing Address 520 East 81st Street
Apartment 9K

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10028 |
|------------------|-------------|-------------------|

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 ▼ **230.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 18 | / | 2011 |

Transaction ID : 3131102

Amount of Each Receipt this Period

| |
|-------|
| 30.00 |
|-------|

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 120.00 |
| 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 412 OF 2452 |
| | <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. Louise B Landreth
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 592
 131 Kehoe Way
 City Inverness State CA Zip Code 94937
 Name of Employer n/a Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3126044
 Amount of Each Receipt this Period
 12.00

B. Ms. Lynn D. Lane
 Full Name (Last, First, Middle Initial)
 Mailing Address 115 Central Park West
 #15H
 City New York State NY Zip Code 10023
 Name of Employer n/a 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
 12 / 01 / 2011
Transaction ID : 3119342
 Amount of Each Receipt this Period
 50.00

C. Ms. Patricia Langenberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 Chancellor Ln
 City Queenstown State MD Zip Code 21658
 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
 12 / 07 / 2011
Transaction ID : 3123311
 Amount of Each Receipt this Period
 500.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 562.00 |
| 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 413 OF 2452 |
| | <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

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Jordan Langner | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2011 Transaction ID : 3137712 |
| Mailing Address 46 Tamarack DR | | Amount of Each Receipt this Period 10.00 |
| City Delmar | State NY | Zip Code 12054 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation retired | |
| 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) B. Ms. Kathryn Lanoue | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2011 Transaction ID : 3126810 |
| Mailing Address 417 Hilltop Rd. | | Amount of Each Receipt this Period 70.00 |
| City Hummelstown | State PA | Zip Code 17036 |
| 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 ▼ 240.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Harvey Lapidés | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 18 / 2011 Transaction ID : 3131334 |
| Mailing Address 5305 College Avenue | | Amount of Each Receipt this Period 100.00 |
| City Oakland | State CA | Zip Code 94618 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self | Occupation Physician | |
| 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).....▶ | 180.00 |
| 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 414 OF 2452
(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. sarah Jane Jane Lapin
 Full Name (Last, First, Middle Initial)
 Mailing Address 1671 Las Canoas Road
 City Santa Barbara State CA Zip Code 93105
 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 ▼ **375.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126674
 Amount of Each Receipt this Period
250.00

B. Ms. Sue Lapin
 Full Name (Last, First, Middle Initial)
 Mailing Address 1334 Green Hill Avenue
 City West Chester State PA Zip Code 19380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lapin Systems Occupation Computer Software Consultant
 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
 12 / 15 / 2011
Transaction ID : 3129033
 Amount of Each Receipt this Period
25.00

C. Ms. Ann Lapp
 Full Name (Last, First, Middle Initial)
 Mailing Address W240 Woodridge Dr.
 City Eau Claire State WI Zip Code 54701
 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 ▼ **325.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132185
 Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **400.00**
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 415 OF 2452 |
| | <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. Joseph W. Lapsley | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2011 |
| Mailing Address 1140 Maple Ave. #3 | | Transaction ID : 3122419 |
| City Evanston | State IL | Zip Code 60202 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| Name of Employer Columbia College of Art | Occupation professor | |
| 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) B. Ms. Andrea H. LaRue | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2011 |
| Mailing Address 6512 Ridge Drive | | Transaction ID : 3122820 |
| City Bethesda | State MD | Zip Code 20816 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Nueva Vista Group | Occupation Consultant | |
| 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. Janis R. Latham | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address 79 Chapel Ln. | | Transaction ID : 3134764 |
| City Brewster | State MA | Zip Code 02631 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| Name of Employer n/a | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 212.50 | |

| | |
|--|---------|
| 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 416 OF 2452
(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. C Latham

Mailing Address 2208 Fairview Ave East

City State Zip Code
Seattle WA 98102

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 ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132454

Amount of Each Receipt this Period
500.00

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

Mailing Address 6527 Cloverbrook Drive

City State Zip Code
Brentwood TN 37027

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

Name of Employer Occupation
self nanny

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
 12 / 14 / 2011
Transaction ID : 3127654

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
c. Dr. Marsha Z. Laufer

Mailing Address 1750 S. Ocean Blvd

City State Zip Code
Manalapan FL 33462

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

Name of Employer Occupation
not applicable retired speech-langu

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
 12 / 05 / 2011
Transaction ID : 3121180

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5700.00

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 417 OF 2452 |
| | <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. Lois Lautenberg

Mailing Address 6 Lonergan Lane

City West Orange State NJ Zip Code 07052

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 M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : 3140614

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
B. Ms. Lois Lautenberg

Mailing Address 6 Lonergan Lane

City West Orange State NJ Zip Code 07052

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 M / D D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : 3140615

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
C. Ms. Elaine C. Lavaute

Mailing Address 701 Pennsylvania Avenue Apt. 1
Apt. 1005

City Washington State DC Zip Code 20004

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 ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : 3128589

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... **45.00**

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 418 OF 2452 |
| | (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

Full Name (Last, First, Middle Initial)
A. Mr. Murray Laver

Mailing Address 1950 SW Whiteside Dr.

City Corvallis State OR Zip Code 97333

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 ▼ **376.25**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3133437

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. Ms. Lynn LaVerdure

Mailing Address 12932 S.E. Kent-Kangley Rd #144

City Kent State WA Zip Code 98030

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

Name of Employer Boeing Occupation Web Developer

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
 12 / 07 / 2011

Transaction ID : 3123574

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
C. Ms. Ruth Lavine

Mailing Address 10560 Wilshire Blvd. Apt. 1703

City Los Angeles State CA Zip Code 90024

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
 12 / 15 / 2011

Transaction ID : 3129451

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **125.00**

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 419 OF 2452 |
| | <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. Marta J. Lawrence | | Date of Receipt 12 / 08 / 2011 Transaction ID : 3123955 |
| Mailing Address 15 Verna Hill Road | | Amount of Each Receipt this Period 500.00 |
| City Fairfield | State CT | Zip Code 06824 |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date 500.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-----------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr. Robert Lawton | | Date of Receipt 12 / 16 / 2011 Transaction ID : 3130398 |
| Mailing Address PSC 80 Box 13943 | | Amount of Each Receipt this Period 100.00 |
| City APO | State AP | Zip Code 96367 |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date 250.00 |
| Name of Employer Kadena High School (DoDEA/DoDDS - Paci | Occupation Teacher | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-----------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Lucile Layne | | Date of Receipt 12 / 19 / 2011 Transaction ID : 3132021 |
| Mailing Address 13226 Old 12 Rd. | | Amount of Each Receipt this Period 25.00 |
| City Tipton | State MO | Zip Code 65081 |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date 550.00 |
| Name of Employer n/a | Occupation RETIRED | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 625.00 |
| 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 420 OF 2452 |
| | <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 Lazar
Full Name (Last, First, Middle Initial)
Mailing Address 430 Wedgewood Dr.
City Easton State PA Zip Code 18045
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 ▼ 225.00

Date of Receipt 12 / 16 / 2011
Transaction ID : 3131419
Amount of Each Receipt this Period 125.00

B. Ms. Nancy Lazar
Full Name (Last, First, Middle Initial)
Mailing Address 20 Pierrepont Street #5C
City Brooklyn State NY Zip Code 11201
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Disabled
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt 12 / 31 / 2011
Transaction ID : 3139163
Amount of Each Receipt this Period 100.00

C. Ms. Mary K. Lazarus
Full Name (Last, First, Middle Initial)
Mailing Address 2094 Park Hill Dr.
City Columbus State OH Zip Code 43209
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation Community Volunteer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3131857
Amount of Each Receipt this Period 140.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 365.00
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 421 OF 2452
(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 J Leanhart
 Full Name (Last, First, Middle Initial)
 Mailing Address 239 Brannan St. 7C
 City San Francisco State CA Zip Code 94107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dept. of Homeland Security Occupation federal govt
 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
 12 / 26 / 2011
Transaction ID : 3135825
 Amount of Each Receipt this Period
 150.00

B. Ms. Kathleen Leavey
 Full Name (Last, First, Middle Initial)
 Mailing Address 3448 Kensington Avenue
 City Detroit State MI Zip Code 48224
 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 ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 3126174
 Amount of Each Receipt this Period
 30.00

C. Ms. Marion E Leavitt
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Lucille Blvd
 City New City State NY Zip Code 10956
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131236
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 205.00
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 422 OF 2452
(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. Anne Leduc

Mailing Address 200 Pleasant Valley Avenue

City State Zip Code
Moorestown NJ 08057

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 ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2011
Transaction ID : 3125845

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
B. Ms. Harriet Lefley

Mailing Address 5841 SW 63RD Ct.

City State Zip Code
South Miami FL 33143

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

Name of Employer Occupation
Univ. of Miami School of Med. Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134501

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
C. Ms. Monna S S. Leitner

Mailing Address 1777 Deep Springs Lane

City State Zip Code
Lincoln CA 95648

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 ▼
540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128613

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00

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 423 OF 2452 |
| | <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. Ann S. Lemke
Full Name (Last, First, Middle Initial)

Mailing Address 7450 Olivetas Ave. # 340

| | | |
|------------------|-------------|-------------------|
| City La Jolla | State CA | Zip Code 92037 |
|------------------|-------------|-------------------|

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 ▼
500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 19 | / | 2011 |

Transaction ID : 3131837

Amount of Each Receipt this Period
250.00

B. Ms. Joan Lenes
Full Name (Last, First, Middle Initial)

Mailing Address 197 Governors Lane

| | | |
|-------------------|-------------|-------------------|
| City Shelburne | State VT | Zip Code 05482 |
|-------------------|-------------|-------------------|

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 ▼
305.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129245

Amount of Each Receipt this Period
30.00

C. Ms. Harriet Lerner
Full Name (Last, First, Middle Initial)

Mailing Address 1509 Crescent Rd.

| | | |
|------------------|-------------|-------------------|
| City Lawrence | State KS | Zip Code 66044 |
|------------------|-------------|-------------------|

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

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 28 | / | 2011 |

Transaction ID : 3135140

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 380.00 |
| 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 424 OF 2452 |
| | <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. Thomas A. Lerner
Full Name (Last, First, Middle Initial)

Mailing Address 17516 Ballinger Way NE

| | | |
|--------------------------|-------------|-------------------|
| City Lake Forest Park | State WA | Zip Code 98155 |
|--------------------------|-------------|-------------------|

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

| | |
|--|------------------------|
| Name of Employer Tom.Lerner@comcast.net | Occupation Attorney |
|--|------------------------|

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 |
| 12 | / | 30 | / | 2011 |

Transaction ID : 3138629

Amount of Each Receipt this Period
250.00

B. Ms. Mary Letorney
Full Name (Last, First, Middle Initial)

Mailing Address 31 Park Ave.

| | | |
|------------------------|-------------|-------------------|
| City South Weymouth | State MA | Zip Code 02190 |
|------------------------|-------------|-------------------|

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 ▼
205.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 19 | / | 2011 |

Transaction ID : 3132196

Amount of Each Receipt this Period
55.00

C. 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 n/a | 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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128802

Amount of Each Receipt this Period
1000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1305.00 |
| 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 425 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Ms. Martha Lever | | Date of Receipt 12 / 20 / 2011 Transaction ID : 3133358 |
| Mailing Address 1A Exum Dr. | | Amount of Each Receipt this Period 100.00 |
| City West Columbia | State SC | Zip Code 29169 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 425.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr. L. David David Leverenz | | Date of Receipt 12 / 17 / 2011 Transaction ID : 3130406 |
| Mailing Address 2150 NW 2nd Ave. | | Amount of Each Receipt this Period 350.00 |
| City Gainesville | State FL | Zip Code 32603 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer University of Florida | Occupation retired English prof | |
| 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. Mr. Matthew Levey | | Date of Receipt 12 / 25 / 2011 Transaction ID : 3135506 |
| Mailing Address 1204 Greensboro Rd | | Amount of Each Receipt this Period 20.00 |
| City Birmingham | State AL | Zip Code 35208 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Birmingham-Southern College | Occupation Professor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 220.00 | |

| | |
|--|--------|
| 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 426 OF 2452
(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. 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 n/a 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
 12 / 20 / 2011
Transaction ID : 3133342
 Amount of Each Receipt this Period
 1500.00

B. Mr. Jack G. Levine
 Full Name (Last, First, Middle Initial)
 Mailing Address 7071 Varna Avenue
 City North Hollywood State CA Zip Code 91605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cal State Los Angeles Occupation Professor
 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
 12 / 05 / 2011
Transaction ID : 3121174
 Amount of Each Receipt this Period
 400.00

C. Stehenq Levine
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 Hedgerow Lane
 City Jericho State NY Zip Code 11753
 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 ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3127668
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1925.00
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 427 OF 2452 |
| | (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. Maria Levinson
Full Name (Last, First, Middle Initial)

Mailing Address 200 Leeder Hill Drive
Apt. 313

City Hamden State CT Zip Code 06517

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 ▼
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2011

Transaction ID : 3126982

Amount of Each Receipt this Period
100.00

B. Ms. Mary A. Levitt
Full Name (Last, First, Middle Initial)

Mailing Address 74 Cloud View Rd.

City Sausalito State CA Zip Code 94965

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

Name of Employer Breuners Arizona Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2011

Transaction ID : 3134454

Amount of Each Receipt this Period
140.00

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

Mailing Address PO Box 358

City North Powder State OR Zip Code 97867

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

Name of Employer Agri-Star, Inc Occupation Office Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : 3129615

Amount of Each Receipt this Period
25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 265.00 |
| 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 428 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Mrs. Eleanor G Lewis | | Date of Receipt 12 / 07 / 2011 Transaction ID : 3123443 |
| Mailing Address 4000 Cathedral Ave., NW Apt. 7 Apartment 736B | | Amount of Each Receipt this Period 1000.00 |
| City Washington | State DC | |
| Zip Code 20016 | FEC ID number of contributing federal political committee. C | Aggregate Year-to-Date ▼ 1000.00 |
| Name of Employer N/A | Occupation Retired federal empl | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Rita Lewis | | Date of Receipt 12 / 06 / 2011 Transaction ID : 3122428 |
| Mailing Address 25 Massachusetts Ave NW, Suote | | Amount of Each Receipt this Period 500.00 |
| City Washington | State DC | |
| Zip Code 20001 | FEC ID number of contributing federal political committee. C | Aggregate Year-to-Date ▼ 500.00 |
| Name of Employer National Cable & Telecommunications As | Occupation Senior Vice Presiden | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Ms. Ruth A. Lezotte | | Date of Receipt 12 / 15 / 2011 Transaction ID : 3128585 |
| Mailing Address 4053 Highland Terrace | | Amount of Each Receipt this Period 40.00 |
| City Okemos | State MI | |
| Zip Code 48864 | FEC ID number of contributing federal political committee. C | Aggregate Year-to-Date ▼ 340.00 |
| Name of Employer Effective Schools Products, ltd | Occupation Pre | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1540.00 |
| 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 429 OF 2452 |
| | <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 Libsch | | Date of Receipt |
| Mailing Address 1517 E 900 S | | <input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Salt Lake City | UT | 84105 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3124009 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="50.00"/> |
| 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. Ms. Norma Liebenberg | | Date of Receipt |
| Mailing Address 49 Starboard Tack Dr. | | <input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Salem | SC | 29676 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3131533 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="140.00"/> |
| Name of Employer | Occupation | |
| n/a | Retired | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="340.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ronni Lieberman | | Date of Receipt |
| Mailing Address 32 Littleworth lane | | <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Sea Cliff | NY | 11579 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3138923 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="1000.00"/> |
| Name of Employer | Occupation | |
| Mt Sinai Medical Center/NYCHHC | MD | |
| 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="1190.00"/> |
| 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 430 OF 2452
(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. Leslie Lieberman
 Full Name (Last, First, Middle Initial)
 Mailing Address 2853 Aloma Oaks Drive
 City Oviedo State FL Zip Code 32765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UCF Occupation Professor Emerita
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130422
 Amount of Each Receipt this Period
 100.00

B. Dr. Alice A Lieberman
 Full Name (Last, First, Middle Initial)
 Mailing Address 754 Sunset Drive
 City Lawrence State KS Zip Code 66044
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Kansas Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126224
 Amount of Each Receipt this Period
 100.00

C. Mr. Mark Liebow
 Full Name (Last, First, Middle Initial)
 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 Mayo Foundation Occupation Physician
 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
 12 / 28 / 2011
Transaction ID : 3135145
 Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
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 431 OF 2452 |
| | <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. Joseph E. Lifschultz | | Date of Receipt |
| Mailing Address 5825 Nottingham Drive | | <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| El Sobrante | CA | 94803 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3131190 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="200.00"/> |
| Name of Employer | Occupation | |
| REQUESTED | REQUESTED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="240.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Anita Lighter | | Date of Receipt |
| Mailing Address 55 N. Brighton Avenue | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Upper Darby | PA | 19082 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3128822 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="200.00"/> |
| Name of Employer | Occupation | |
| City of Newport News | Unemployed | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="240.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Jo Marie Lilly | | Date of Receipt |
| Mailing Address 3131 Maple #10D | | <input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Dallas | TX | 75201 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3126106 |
| FEC ID number: <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="540.00"/> |
| 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 432 OF 2452 |
| | <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. Lindstrom | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2011 Transaction ID : 3119258 |
| Mailing Address 209 Idlewylde Drive | | Amount of Each Receipt this Period 25.00 |
| City Louisville | State KY | Zip Code 40206 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 237.11 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Carol Lingenfelter | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2011 Transaction ID : 3133389 |
| Mailing Address 11581 Eliot Ct. | | Amount of Each Receipt this Period 250.00 |
| City Denver | State CO | Zip Code 80234 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer self-employed | Occupation Social Worker | |
| 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. Connie Lipnicki | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 21 / 2011 Transaction ID : 3133613 |
| Mailing Address 21 Tall Tree Ln. | | Amount of Each Receipt this Period 100.00 |
| City Smithtown | State NY | Zip Code 11787 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| 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).....▶ | 375.00 |
| 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 433 OF 2452 |
| | <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. Margaret LIPPART

Mailing Address 5207

| | | |
|--------------------|-------------|-------------------|
| City Vero Beach | State FL | Zip Code 32967 |
|--------------------|-------------|-------------------|

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 ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011

Transaction ID : 3127675

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Ms. Inez Lippes

Mailing Address 31 Hampton Hill Drive

| | | |
|-----------------|-------------|-------------------|
| City Buffalo | State NY | Zip Code 14221 |
|-----------------|-------------|-------------------|

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 ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011

Transaction ID : 3127001

Amount of Each Receipt this Period
200.00

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

Mailing Address 1521 2nd Ave., Apt. 1201

| | | |
|-----------------|-------------|-------------------|
| City Seattle | State WA | Zip Code 98101 |
|-----------------|-------------|-------------------|

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

| | |
|--|------------------|
| Name of Employer Highline Medical Group | Occupation MD |
|--|------------------|

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
 12 / 15 / 2011

Transaction ID : 3129790

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 434 OF 2452 |
| | <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. Ann Liston | | Date of Receipt 12 / 08 / 2011 Transaction ID : 3143454 |
| Mailing Address 222 W Ontario St Suite 100 | | Amount of Each Receipt this Period 500.00 |
| City Chicago | State IL | |
| Zip Code 60654 | | Aggregate Year-to-Date ▼ 500.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Adelstein Liston | Occupation consultant | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|---|-----------------------|---|
| Full Name (Last, First, Middle Initial) B. Dr. Myra R. Litman | | Date of Receipt 12 / 21 / 2011 Transaction ID : 3133864 |
| Mailing Address 11341 Buena Vista | | Amount of Each Receipt this Period 100.00 |
| City Leawood | State KS | |
| Zip Code 66211 | | Aggregate Year-to-Date ▼ 325.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|-------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mr. Mark Litt | | Date of Receipt 12 / 20 / 2011 Transaction ID : 3133501 |
| Mailing Address 244 Duncaster Rd. | | Amount of Each Receipt this Period 100.00 |
| City Bloomfield | State CT | |
| Zip Code 6002 | | Aggregate Year-to-Date ▼ 300.00 |
| 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) ▼ |

| | |
|--|--------|
| 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 435 OF 2452 |
| | <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. Daniel E Livingston | | Date of Receipt |
| Mailing Address 191 Warrenton Avenue | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City State Zip Code West Hartford CT 06119 | | Transaction ID : 3128578 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer Occupation LAPM&K, PC Attorney | | <input type="text" value="20.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="240.00"/> |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Ms. Mary Jean Jean Livingston | | Date of Receipt |
| Mailing Address 7115 Warren Road | | <input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2011"/> |
| City State Zip Code Ann Arbor MI 48105 | | Transaction ID : 3122801 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer Occupation Wayne County Community College retired professor | | <input type="text" value="20.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="225.00"/> |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Ms. Mary Jean Jean Livingston | | Date of Receipt |
| Mailing Address 7115 Warren Road | | <input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2011"/> |
| City State Zip Code Ann Arbor MI 48105 | | Transaction ID : 3127021 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer Occupation Wayne County Community College retired professor | | <input type="text" value="65.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="225.00"/> |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="105.00"/> |
| 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 436 OF 2452 |
| | <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. Pearl S. Livingstone
 Full Name (Last, First, Middle Initial)
 Mailing Address 13415 Shaker Blvd. #8A-1
 City Cleveland State OH Zip Code 44120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation Retired Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **312.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : 3137986
 Amount of Each Receipt this Period
50.00

B. Ms. Susan J Lockhart
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 Foster Place
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129519
 Amount of Each Receipt this Period
150.00

C. Ms. Susan J Lockhart
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 Foster Place
 City Cambridge State MA Zip Code 02138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132495
 Amount of Each Receipt this Period
20.00

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 220.00 |
| 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 437 OF 2452 |
| | <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. Barbara D. Lockwood | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 3129515 | | |
| Mailing Address 11434 North 43rd Street | | Amount of Each Receipt this Period 20.00 | | |
| City Phoenix | State AZ | Zip Code 85028 | Aggregate Year-to-Date ▼ 240.00 | |
| FEC ID number of contributing federal political committee. C | | Name of Employer APS | | |
| Occupation Manager | | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | | |
|---|-------------|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Kathy Loeb | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 3128378 | | |
| Mailing Address 350 Blueberry Rd. | | Amount of Each Receipt this Period 25.00 | | |
| City Lexington | State KY | Zip Code 40503 | Aggregate Year-to-Date ▼ 475.00 | |
| FEC ID number of contributing federal political committee. C | | Name of Employer self | | |
| Occupation part-time potter | | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | | |
|---|-------------|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Jane Loewenson | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2011 Transaction ID : 3138924 | | |
| Mailing Address 1127 Fairview Court | | Amount of Each Receipt this Period 500.00 | | |
| City Silver Spring | State MD | Zip Code 20910 | Aggregate Year-to-Date ▼ 500.00 | |
| FEC ID number of contributing federal political committee. C | | Name of Employer NVG, LLC | | |
| Occupation Consultant | | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 545.00 |
| TOTAL This Period (last page this line number only)..... | 545.00 |

**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 438 OF 2452 |
| | <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 Logan

Mailing Address PO Box 149

City Alpine State TX Zip Code 79831

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

Name of Employer self Occupation Music

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3132355

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Ms. Yvonne M. Logan

Mailing Address 1 McKnight Pl., Apt. 141

City Saint Louis State MO Zip Code 63124

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

Name of Employer World Community Ctr. of St.Louis Occupation Director

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
 12 / 20 / 2011

Transaction ID : 3133367

Amount of Each Receipt this Period
125.00

Full Name (Last, First, Middle Initial)
C. Ms. Janet Lohr

Mailing Address 66 Granada Ave.

City San Francisco State CA Zip Code 94112

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

Name of Employer CCSF Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **257.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011

Transaction ID : 3131441

Amount of Each Receipt this Period
50.00

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 195.00 |
| 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 439 OF 2452 |
| | <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

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Ms. Kathleen Nies Lohr | | Date of Receipt |
| Mailing Address 30086 Britt | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Chapel Hill | NC | 27517 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3128763 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| RTI International | Health policy analyst | <input type="text" value="3500"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="470.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Gina Maria Lombardi | | Date of Receipt |
| Mailing Address PO Box 10278 | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Torrance | CA | 90505 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3134681 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| REQUESTED | REQUESTED | <input type="text" value="1500"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="275.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Alice London | | Date of Receipt |
| Mailing Address 101 Ridgemont Court | | <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Austin | TX | 78746 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3127242 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| Bishop, London & Dodds | attorney | <input type="text" value="5000"/> |
| 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"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="685.00"/> |
| 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 440 OF 2452 |
| | <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. Sue Long | | Date of Receipt 12 / 19 / 2011 Transaction ID : 3131911 |
| Mailing Address 108 Ridgely Rd. | | Amount of Each Receipt this Period 50.00 |
| City Glen Burnie | State MD | Zip Code 21061 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| 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) B. Ms. Helen E. Longino | | Date of Receipt 12 / 11 / 2011 Transaction ID : 3125619 |
| Mailing Address 1318 Noe St | | Amount of Each Receipt this Period 10.00 |
| City San Francisco | State CA | Zip Code 94131 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Stanford University | Occupation Educator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 325.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Mr. Ronald N Loomis | | Date of Receipt 12 / 25 / 2011 Transaction ID : 3135671 |
| Mailing Address 39 Reyquinn St. | | Amount of Each Receipt this Period 25.00 |
| City New London | State CT | Zip Code 06320 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| 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).....▶ | 85.00 |
| 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 441 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <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)
EMILY's List

A. Ms. Patricia Lorsch
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 Washington Ave.
 City Cambridge State MA Zip Code 2140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133516
 Amount of Each Receipt this Period
 300.00

B. Kim Love
 Full Name (Last, First, Middle Initial)
 Mailing Address 9116 Glenridge Rd.
 City Silver Spring State MD Zip Code 20910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PhRMA Occupation Lobbyist
 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
 12 / 19 / 2011
Transaction ID : 3132357
 Amount of Each Receipt this Period
 500.00

C. Ms. Linda B. Lovett
 Full Name (Last, First, Middle Initial)
 Mailing Address 1508 Seasons Point Court
 City Apopka State FL Zip Code 32712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LOVETT Occupation Producer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128814
 Amount of Each Receipt this Period
 20.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 820.00 |
| 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 442 OF 2452 |
| | <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. Carole Lovinger
 Full Name (Last, First, Middle Initial)
 Mailing Address 5300 Singing Hills Dr
 City Las Vegas State NV Zip Code 89130
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129214
 Amount of Each Receipt this Period
 40.00

B. 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 n/a 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
 12 / 27 / 2011
Transaction ID : 3134431
 Amount of Each Receipt this Period
 200.00

C. Mr. Charles Lowell
 Full Name (Last, First, Middle Initial)
 Mailing Address 323 Garfield Road
 City Concord State MA Zip Code 01742
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129306
 Amount of Each Receipt this Period
 20.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 260.00 |
| 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 443 OF 2452 |
| | <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. Nan Lowerre | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address 212 North St. | | Transaction ID : 3134697 |
| City Chagrin Falls | State OH | Zip Code 44022 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer n/a | Occupation Retired | Amount of Each Receipt this Period 125.00 |
| 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. Sandra Lowery | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2011 |
| Mailing Address 6627 Sewanee Ave | | Transaction ID : 3138176 |
| City Houston | State TX | Zip Code 77005 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer S&R Resources, Inc. | Occupation Sales | Amount of Each Receipt this Period 1000.00 |
| 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. Charlotte Lowrey | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2011 |
| Mailing Address 4838 Oscar Court | | Transaction ID : 3139074 |
| City Fremont | State CA | Zip Code 94538 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer n/a | Occupation Retired | Amount of Each Receipt this Period 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 400.00 | |

| | |
|--|---------|
| 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 444 OF 2452 |
| | <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 n/a Occupation Retired
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **3500.00**

Date of Receipt
12 / 16 / 2011
Transaction ID : 3130821
Amount of Each Receipt this Period
2000.00

B. Ms. Lynn Lowry
Full Name (Last, First, Middle Initial)
Mailing Address 375 Heather Pl.
City Laguna Beach State CA Zip Code 92651
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
12 / 27 / 2011
Transaction ID : 3134689
Amount of Each Receipt this Period
200.00

C. Ms. Betsy Lozoff
Full Name (Last, First, Middle Initial)
Mailing Address 1516 Longshore Drive
City Ann Arbor State MI Zip Code 48105
FEC ID number of contributing federal political committee. **C**
Name of Employer MD Occupation University of Michig
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt
12 / 21 / 2011
Transaction ID : 3133611
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... **2450.00**
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 445 OF 2452 |
| | <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. Mrs. Sandra Lubert | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 28 Rose Avenue | | Transaction ID : 3129056 |
| City Great Neck | State NY | Zip Code 11021 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Great Neck Public School | Occupation Teacher | |
| 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) B. Ms. Lenore M. Lucey | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 21 / 2011 |
| Mailing Address 3233 Ellicott St. NW | | Transaction ID : 3133605 |
| City Washington | State DC | Zip Code 20008 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer National Council of Architects | Occupation Architect | |
| 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. Peter Lund | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 3712 61st Street | | Transaction ID : 3128182 |
| City Sacramento | State CA | Zip Code 95820 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 150.00 |
| Name of Employer n/a | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 260.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 425.00 |
| 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 446 OF 2452 |
| | <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 Luray | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 700 6th St NW | | Transaction ID : 3128098 |
| City Washington | State DC | Zip Code 20001 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 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 ▼ 1000.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Ms. Jodi I. Lustig | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2011 |
| Mailing Address 130 W 79th #6F | | Transaction ID : 3138450 |
| City New York | State NY | Zip Code 10024 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 1000.00 | |
| Name of Employer self | Occupation writer/real estate | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1300.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Ms. Tamera S. Luzzatto | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2011 |
| Mailing Address 3014 32nd St NW | | Transaction ID : 3126223 |
| City Washington | State DC | Zip Code 20008 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 1000.00 | |
| Name of Employer Sen. Rockefeller | Occupation Legislative Aide | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 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 447 OF 2452 |
| | (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. Edith Lycke | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 |
| Mailing Address 4730 Melissa Lane | | Transaction ID : 3125829 |
| City Dallas | State TX | Zip Code 75229 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer REQUESTED | Occupation homemaker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1750.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Joanne Lyman | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2011 |
| Mailing Address 163 East 81 St Street | | Transaction ID : 3119264 |
| City NYC | State NY | Zip Code 10028 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 |
| Name of Employer self-employed | Occupation designer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 650.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Dona Lee Lynch | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2011 |
| Mailing Address PO Box 183 20 Whig Street | | Transaction ID : 3125436 |
| City Trumansburg | State NY | Zip Code 14886 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer n/a | Occupation RETIRED | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 400.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1150.00 |
| 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 448 OF 2452 |
| | <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. Mrs. Christine Lynch
 Full Name (Last, First, Middle Initial)
 Mailing Address 1741 Emerald Ct
 City Robins State IA Zip Code 52328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation self employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3124808
 Amount of Each Receipt this Period
 100.00

B. John Lynch
 Full Name (Last, First, Middle Initial)
 Mailing Address 20501 Ventura Blvd. Ste. 325
 City Woodland Hills State CA Zip Code 91364
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation actor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011
Transaction ID : 3120745
 Amount of Each Receipt this Period
 1400.00

C. Ms. Elaine C. Lynch
 Full Name (Last, First, Middle Initial)
 Mailing Address 1120 Locust Avenue SE
 City Huntsville State AL Zip Code 35801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State of Alabama Occupation Board of Voter Registration
 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
 12 / 16 / 2011
Transaction ID : 3130937
 Amount of Each Receipt this Period
 20.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1520.00 |
| 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 449 OF 2452 |
| | (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. Mr. Philip T. Lynes
Full Name (Last, First, Middle Initial)

Mailing Address 586 Central Ave

| | | |
|-------------------------|-------------|-------------------|
| City Needham Heights | State MA | Zip Code 02494 |
|-------------------------|-------------|-------------------|

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

| | |
|--|-------------------------------|
| Name of Employer Exploration School Inc | Occupation IT Professional |
|--|-------------------------------|

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 |
| 12 | / | 14 | / | 2011 |

Transaction ID : 3127686

Amount of Each Receipt this Period
100.00

B. Ms. Fran Lyons
Full Name (Last, First, Middle Initial)

Mailing Address 17044 Embassy Drivee

| | | |
|----------------|-------------|-------------------|
| City Encino | State CA | Zip Code 91316 |
|----------------|-------------|-------------------|

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 ▼
350.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128381

Amount of Each Receipt this Period
75.00

C. Ms. Rosemary Lyons
Full Name (Last, First, Middle Initial)

Mailing Address 124 Chase Road

| | | |
|---------------------|-------------|-------------------|
| City Pine Plains | State NY | Zip Code 12567 |
|---------------------|-------------|-------------------|

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

| | |
|---|------------------------------------|
| Name of Employer Columbia-Greene Community College | Occupation semi-ret. college in |
|---|------------------------------------|

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 |
| 12 | / | 28 | / | 2011 |

Transaction ID : 3136696

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 275.00 |
| 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 450 OF 2452 |
| | <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. Dennis Lytton | | | Date of Receipt |
| Mailing Address 612 S. Flower St. #910 | | | <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3119429 |
| Los Angeles | CA | 90017 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="21.00"/> |
| Name of Employer | Occupation | | |
| Los Angeles Metro Authority | Operations Superviso | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="231.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|--|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) B. Ms. R. Andrew Maass | | | Date of Receipt |
| Mailing Address 536 Reclinata Drive | | | <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3132885 |
| Longboat Key | FL | 34228 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="100.00"/> |
| Name of Employer | Occupation | | |
| n/a | Retired | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="285.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|--|--------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Lisa M. Maatz | | | Date of Receipt |
| Mailing Address 1119 O Street N.W. #2 #2 | | | <input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3126726 |
| Washington | DC | 20005 | 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 | | |
| American Association of University Wom | Director of Public P | | |
| 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="1121.00"/> |
| 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 451 OF 2452 |
| | (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. Mr. Stewart Macaulay | | Date of Receipt |
| Mailing Address 314 Shepard Ter. | | <input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Madison | WI | 53705 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3125413 |
| 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 | |
| Univ Wisconsin-Madison | Professor | |
| 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) ▼ | | |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Mr. Stewart Macaulay | | Date of Receipt |
| Mailing Address 314 Shepard Ter. | | <input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Madison | WI | 53705 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3139385 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="350.00"/> |
| Name of Employer | Occupation | |
| Univ Wisconsin-Madison | Professor | |
| 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) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Karen M. MacDougall | | Date of Receipt |
| Mailing Address 2655 Greenway Drive | | <input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Kelseyville | CA | 95451 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3134242 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="20.00"/> |
| Name of Employer | Occupation | |
| Self | Grantwriter & Consultant | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="240.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="1370.00"/> |
| 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 452 OF 2452 |
| | <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. Mrs. Ann H. Mack
 Full Name (Last, First, Middle Initial)
 Mailing Address 750 Weaver Dairy Rd., Apt. 243
 City Chapel Hill State NC Zip Code 27514
 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 ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131879
 Amount of Each Receipt this Period
 50.00

B. Ms. Kerry E Mack
 Full Name (Last, First, Middle Initial)
 Mailing Address 2034 Placida Road
 City Englewood State FL Zip Code 34224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mack Law Firm Chartered Occupation trial lawyer
 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
 12 / 15 / 2011
Transaction ID : 3129430
 Amount of Each Receipt this Period
 50.00

C. Kevin Mack
 Full Name (Last, First, Middle Initial)
 Mailing Address 2001 N. Beauregard Street, Sui
 City Alexandria State VA Zip Code 22311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mack/Crouse Group Occupation Consultant
 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
 12 / 05 / 2011
Transaction ID : 3120751
 Amount of Each Receipt this Period
 500.00

| | |
|--|--------|
| 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 453 OF 2452 |
| | <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. Julia MacKall
Full Name (Last, First, Middle Initial)

Mailing Address 23639 Holly Cir.

City Lewes State DE Zip Code 19958

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 ▼ **325.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3132187

Amount of Each Receipt this Period
125.00

B. Mr. Kevin R. Mackenzie
Full Name (Last, First, Middle Initial)

Mailing Address 144 166TH Avenue SE

City Bellevue State WA Zip Code 98008

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

Name of Employer AMAZON.COM Occupation SOFTWARE DEVELOPER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129437

Amount of Each Receipt this Period
35.00

C. Ms. Jo Anne Huntley Magee
Full Name (Last, First, Middle Initial)

Mailing Address 751 East Rd.

City Richmond State MA Zip Code 01254

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

Name of Employer Self Occupation Health Care Management

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
 12 / 19 / 2011

Transaction ID : 3131855

Amount of Each Receipt this Period
1000.00

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1160.00 |
| 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 454 OF 2452 |
| | <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. Susan B E. B. Magee
 Full Name (Last, First, Middle Initial)
 Mailing Address 4000 Cathedral Ave NW
 Apt. 604B
 City Washington State DC Zip Code 20016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation Writer-Healer
 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
 12 / 13 / 2011
Transaction ID : 3126676
 Amount of Each Receipt this Period
 2500.00

B. Ms. Arlee S. Maier
 Full Name (Last, First, Middle Initial)
 Mailing Address 207 Dorchester Lane
 City Alamo State CA Zip Code 94507
 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 ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2011
Transaction ID : 3130438
 Amount of Each Receipt this Period
 250.00

C. Ms. Anne-Marie Mallon
 Full Name (Last, First, Middle Initial)
 Mailing Address 360 Huckle Hill Rd.
 City Bernardston State MA Zip Code 01337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Keene State College Occupation Professor
 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
 12 / 19 / 2011
Transaction ID : 3131916
 Amount of Each Receipt this Period
 100.00

| | |
|--|---------|
| 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: (check only one) | PAGE 455 OF 2452 |
| | <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. Luise Malloy | | Date of Receipt |
| Mailing Address 5808 Carlyle Street | | <input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Cheverly | MD | 20785 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3125954 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="20.00"/> |
| Name of Employer | Occupation | |
| Emerging Markets Mgmt LLC | admin assistant | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="240.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Susan Rabinowitz Malloy | | Date of Receipt |
| Mailing Address 8 Dogwood Lane | | <input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Westport | CT | 06880 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3125407 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="500.00"/> |
| Name of Employer | Occupation | |
| self | ARTIST | |
| 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. Nancy Malpass | | Date of Receipt |
| Mailing Address 766B Espada Drive | | <input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| El Paso | TX | 79912 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3135830 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="20.00"/> |
| Name of Employer | Occupation | |
| Self | Physical Therapist | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="210.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="540.00"/> |
| 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 456 OF 2452
(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. Kathryn Mancheski
 Full Name (Last, First, Middle Initial)
 Mailing Address 3270 County Road X North
 City Stevens Point State WI Zip Code 54482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Qualitas Custom Cleaning, LLC Occupation Self-employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3136714
 Amount of Each Receipt this Period
 100.00

B. Ms. Nancy L. Mangini
 Full Name (Last, First, Middle Initial)
 Mailing Address 1702 Cordilleras Rd.
 City Emerald Hills State CA Zip Code 94062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ERC Inc Occupation Technical Writer
 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
 12 / 27 / 2011
Transaction ID : 3134434
 Amount of Each Receipt this Period
 100.00

C. Mrs. Ruth Manickam
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 Lawrence Drive
 City Lawrenceville State NJ Zip Code 08648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State of New Jersey Occupation Civil Servant
 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
 12 / 15 / 2011
Transaction ID : 3128954
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
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 457 OF 2452 |
| | <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. Joy S. Mankoff | | Date of Receipt |
| Mailing Address 22 Lakeside Park | | <input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Dallas | TX | 75225 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3133595 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="1000.00"/> |
| Name of Employer | Occupation | |
| none | none | |
| 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. Elizabeth Manning | | Date of Receipt |
| Mailing Address 7604 Nez Perce Trace | | <input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Manor | TX | 78653 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3137557 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="20.00"/> |
| Name of Employer | Occupation | |
| self | consultant | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="240.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mr. S. Russell Manning | | Date of Receipt |
| Mailing Address 12522 Choto Mill Lane | | <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Knoxville | TN | 37922 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3133188 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="50.00"/> |
| Name of Employer | Occupation | |
| Tetra Tech HEI | Technical Writer | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="550.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="1070.00"/> |
| 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 458 OF 2452 |
| | <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. Eric Manuel
Full Name (Last, First, Middle Initial)
Mailing Address 1127 Mapleview Ct
City High Point State NC Zip Code 27265
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 **245.00**

Date of Receipt **12 / 01 / 2011**
Transaction ID : 3119282
Amount of Each Receipt this Period **25.00**

B. Ms. Bluma Marcus
Full Name (Last, First, Middle Initial)
Mailing Address 7907 Hampton Court
City University Pike State FL Zip Code 34201
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation Housewife
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **245.00**

Date of Receipt **12 / 23 / 2011**
Transaction ID : 3135686
Amount of Each Receipt this Period **25.00**

C. Ms. Barbara Margolis
Full Name (Last, First, Middle Initial)
Mailing Address 315 E 72nd St., Apt. 9K
City New York State NY Zip Code 10021
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 **450.00**

Date of Receipt **12 / 19 / 2011**
Transaction ID : 3132230
Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **150.00**
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 459 OF 2452 |
| | <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. Judy Storey Maritato
Full Name (Last, First, Middle Initial)

Mailing Address 9725 Woods Dr Unit 507

City Skokie State IL Zip Code 60077

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

Name of Employer Bradford Group Occupation Market Researcher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011

Transaction ID : 3126725

Amount of Each Receipt this Period
 40.00

B. Ms. Estelle Markowitz
Full Name (Last, First, Middle Initial)

Mailing Address 1887 Greenfield Avenue Apt. 31 Apt. 310

City Los Angeles State CA Zip Code 90025

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
 12 / 15 / 2011

Transaction ID : 3129262

Amount of Each Receipt this Period
 25.00

C. Ms. Lucretia A. Marmon
Full Name (Last, First, Middle Initial)

Mailing Address 4921 Cumberland Ave

City Chevy Chase State MD Zip Code 20815

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 M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011

Transaction ID : 3125406

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.00

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 460 OF 2452
(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. Hermine H. Marshall
 Full Name (Last, First, Middle Initial)
 Mailing Address 27 Norwood Ave.
 City Kensington State CA Zip Code 94707
 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 ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131830
 Amount of Each Receipt this Period
 250.00

B. Ms. Mary C. Marshall
 Full Name (Last, First, Middle Initial)
 Mailing Address 7345 Hawkstone Ave. SW
 City Port Orchard State WA Zip Code 98367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dept. of Vet. Affairs Occupation Claims Examiner
 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
 12 / 16 / 2011
Transaction ID : 3131475
 Amount of Each Receipt this Period
 100.00

C. Ms. Marcia A Marshall
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 3324
 City Annapolis State MD Zip Code 21403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NAMSHPD Occupation project director
 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
 12 / 13 / 2011
Transaction ID : 3126265
 Amount of Each Receipt this Period
 100.00

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 461 OF 2452 |
| | <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. Emily Marshall | | Date of Receipt |
| Mailing Address 23350 Los Encinos Way | | <input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Woodland Hls | CA | 91367 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| Self Employed | Homemaker | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="426.00"/> | |
| | | Transaction ID : 3123973 |
| | | Amount of Each Receipt this Period |
| | | <input type="text" value="100.00"/> |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Joan Marshall | | Date of Receipt |
| Mailing Address 1721 Chalk Buttes Road | | <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Ekalaka | MT | 59324 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| Self-employed | Retired veterinarian | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="215.00"/> | |
| | | Transaction ID : 3135690 |
| | | Amount of Each Receipt this Period |
| | | <input type="text" value="15.00"/> |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Sheila Martin | | Date of Receipt |
| Mailing Address 20 Eagle Gap Road | | <input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Novato | CA | 94949 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| n/a | Retired | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="3000.00"/> | |
| | | Transaction ID : 3133941 |
| | | Amount of Each Receipt this Period |
| | | <input type="text" value="2000.00"/> |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="2115.00"/> |
| 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 462 OF 2452
(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. Margaret E. Martin

Mailing Address 10450 Lottsford Rd., Apt. 4009

City State Zip Code
Bowie MD 20721

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 ▼
3550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3125196

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Ms. Patricia Yancey Yancey Martin

Mailing Address 3119 Brockton Way

City State Zip Code
Tallahassee FL 32308

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

Name of Employer Occupation
Florida State University Retired Professor of

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134389

Amount of Each Receipt this Period
265.00

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

Mailing Address 446 State Street

City State Zip Code
San Mateo CA 94401

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
 12 / 15 / 2011
Transaction ID : 3129532

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 540.00

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 463 OF 2452 |
| | <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. Maureen S. Martin
Full Name (Last, First, Middle Initial)

Mailing Address 15601 Dutton

City State Zip Code
Gregory MI 48137

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

Name of Employer Occupation
University of Michigan Fundraiser

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123581

Amount of Each Receipt this Period
25.00

B. Ms. Catherine B Martineau
Full Name (Last, First, Middle Initial)

Mailing Address 3566 Brookside Road

City State Zip Code
Ottawa Hills OH 43606

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

Name of Employer Occupation
MacMillan, Sobanski & Todd LLC Attorney-Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129389

Amount of Each Receipt this Period
25.00

C. Ms. Laura Martineau
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 257

City State Zip Code
Thetford Center VT 05075

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

Name of Employer Occupation
none home with children

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3132363

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 464 OF 2452 |
| | <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. Eileen Marx | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2011 |
| Mailing Address 401 Candlewood Rd. | | Transaction ID : 3126490 |
| City Broomall | State PA | Zip Code 19008 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 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 ▼ 708.11 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Ms. Sally D. Mason | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 806 Settlement Drive | | Transaction ID : 3129219 |
| City Williamsburg | State VA | Zip Code 23188 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25.00 | |
| Name of Employer Omohundro Institute of Early American | Occupation editor, administrato | |
| 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. Marsha Mason | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2011 |
| Mailing Address 906 South St. Francis Dr. Ste. | | Transaction ID : 3132895 |
| City Santa Fe | State NM | Zip Code 87505 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100.00 | |
| Name of Employer Self | Occupation Actress | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 400.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 375.00 |
| 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 465 OF 2452 |
| | <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. Betty Fletcher Mast
 Full Name (Last, First, Middle Initial)
 Mailing Address 6566 France Ave. S, Apt. 208
 Apt. 208
 City Minneapolis State MN Zip Code 55435
 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 ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011
Transaction ID : 3133610
 Amount of Each Receipt this Period
 115.00

B. Ms. Sandra Mast
 Full Name (Last, First, Middle Initial)
 Mailing Address 19231 Sherman Way, unit36
 City Reseda State CA Zip Code 91335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LAUSD Occupation Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3138930
 Amount of Each Receipt this Period
 25.00

C. Ms. Daralyn Mattei
 Full Name (Last, First, Middle Initial)
 Mailing Address 815 W Lakeshore Dr
 City Coeur D Alene State ID Zip Code 83814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer North Idaho College Occupation Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128554
 Amount of Each Receipt this Period
 20.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 160.00 |
| 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 466 OF 2452 |
| | <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. Valerie Matthews
 Full Name (Last, First, Middle Initial)
 Mailing Address 302 Chestnut Street
 City Charlottesville State VA Zip Code 22902
 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 ▼ 275.00

Date of Receipt
 12 / 16 / 2011
Transaction ID : 3131066
 Amount of Each Receipt this Period
 100.00

B. Ms. Valerie Matthews
 Full Name (Last, First, Middle Initial)
 Mailing Address 302 Chestnut Street
 City Charlottesville State VA Zip Code 22902
 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 ▼ 275.00

Date of Receipt
 12 / 19 / 2011
Transaction ID : 3132492
 Amount of Each Receipt this Period
 100.00

C. Ms. Maria Matthews
 Full Name (Last, First, Middle Initial)
 Mailing Address 545 E. Braddock Road Apt. 203
 City Alexandria State VA Zip Code 22314
 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
 12 / 15 / 2011
Transaction ID : 3129234
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 240.00
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 467 OF 2452 |
| | <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. Caroline Matthews | | Date of Receipt |
| Mailing Address 1934 Market Street | | <input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Denver | CO | 80202 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3121263 |
| FEC ID number: <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. Mr. Scott Mauvais | | Date of Receipt |
| Mailing Address 1157 Rainier Avenue | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Pacifica | CA | 94044 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3129412 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="25.00"/> |
| Name of Employer | Occupation | |
| MSFT | analyst | |
| 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) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Tracy Maxwell | | Date of Receipt |
| Mailing Address P.O. Box 2444 | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Hobe Sound | FL | 33475 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3128637 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="25.00"/> |
| Name of Employer | Occupation | |
| Delta Airlines | Flight Attendant | |
| 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"/> |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 468 OF 2452 |
| | (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

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Ms. Joan P Maxwell | | Date of Receipt |
| Mailing Address 3525 Springland Lane NW | | <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2011"/> |
| City Washington State DC Zip Code 20008 | | Transaction ID : 3133129 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer Retired Occupation Chaplain | | <input type="text" value="5000.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="5000.00"/> |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Ms. Gloria May | | Date of Receipt |
| Mailing Address 1219 Oakdyke Ave | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City La Habra Hgts State CA Zip Code 90631 | | Transaction ID : 3128845 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer n/a Occupation Retired | | <input type="text" value="20.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="220.00"/> |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Ms. Kathryn M M. May | | Date of Receipt |
| Mailing Address 8369 N. Gills Pier Road | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City Northport State MI Zip Code 49670 | | Transaction ID : 3129129 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer n/a Occupation Retired | | <input type="text" value="20.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="240.00"/> |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="5040.00"/> |
| 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 469 OF 2452
(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. Douglas Mayer

Mailing Address 2130 Nw 13Th St

City Miami State FL Zip Code 33125

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 ▼ **254.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2011
Transaction ID : 3120023

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Mr. Raymond Mayer

Mailing Address 5015 SE 30th Ave., Apt. 4

City Portland State OR Zip Code 97202

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
 12 / 19 / 2011
Transaction ID : 3132086

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C. Ms. Doe Mayer

Mailing Address 2545 Verbena Dr.

City Los Angeles State CA Zip Code 90068

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

Name of Employer USC Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : 3135233

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **295.00**

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 470 OF 2452 |
| | <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. 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 STARS, Inc. | Occupation Market Research |
|---------------------------------|-------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3134386

Amount of Each Receipt this Period

| |
|--------|
| 215.00 |
|--------|

B. Ms. Mary C C. Mazure
Full Name (Last, First, Middle Initial)

Mailing Address 819 W. University Drive

| | | |
|-------------------|-------------|-------------------|
| City Rochester | State MI | Zip Code 48307 |
|-------------------|-------------|-------------------|

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

| | |
|---|-----------------------|
| Name of Employer Utica Community Schools | Occupation Teacher |
|---|-----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129074

Amount of Each Receipt this Period

| |
|-------|
| 20.00 |
|-------|

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

Mailing Address 1120 Connecticut Ave NW Suite Ste. 1100

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20036 |
|--------------------|-------------|-------------------|

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 ▼ **1040.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 05 | / | 2011 |

Transaction ID : 3121670

Amount of Each Receipt this Period

| |
|------|
| 9.00 |
|------|

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 244.00 |
| 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 471 OF 2452 |
| <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

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) | | Date of Receipt |
| A. Cashbox MCash | | <input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2011"/> |
| Mailing Address 1120 Connecticut Ave NW Suite Ste. 1100 | | Transaction ID : 3126553 |
| City Washington | State DC | Zip Code 20036 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period <input type="text" value="51.00"/> |
| Name of Employer n/a | 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="1040.00"/> | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) | | Date of Receipt |
| B. Cashbox MCash | | <input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2011"/> |
| Mailing Address 1120 Connecticut Ave NW Suite Ste. 1100 | | Transaction ID : 3127120 |
| City Washington | State DC | Zip Code 20036 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period <input type="text" value="2.00"/> |
| Name of Employer n/a | 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="1040.00"/> | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) | | Date of Receipt |
| C. Cashbox MCash | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| Mailing Address 1120 Connecticut Ave NW Suite Ste. 1100 | | Transaction ID : 3129869 |
| City Washington | State DC | Zip Code 20036 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period <input type="text" value="1.00"/> |
| Name of Employer n/a | 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="1040.00"/> | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="54.00"/> |
| 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 472 OF 2452 |
| | <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. Cashbox MCash
Full Name (Last, First, Middle Initial)

Mailing Address 1120 Connecticut Ave NW Suite Ste. 1100
City Washington State DC Zip Code 20036

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 ▼ 1040.00

Date of Receipt 12 / 20 / 2011
Transaction ID : 3133533
Amount of Each Receipt this Period 50.00

B. Ms. Peggy Mcavenia
Full Name (Last, First, Middle Initial)

Mailing Address 9922 W Pineaire Dr.
City Sun City State AZ Zip Code 85351

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 ▼ 522.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129659
Amount of Each Receipt this Period 25.00

C. Mrs. Margaret McCarthy
Full Name (Last, First, Middle Initial)

Mailing Address 3326 Alpine Drive
City Ann Arbor State MI Zip Code 48108

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 ▼ 300.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3128549
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional).....▶ 100.00

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 473 OF 2452 |
| | <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. Elizabeth McCarthy
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 Stonehedge Drive
 City Barnstable State MA Zip Code 02630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kinlin Grover Real Estate Occupation Administrator
 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
 12 / 15 / 2011
Transaction ID : 3129352
 Amount of Each Receipt this Period
 25.00

B. Ms. Margaret McCartney
 Full Name (Last, First, Middle Initial)
 Mailing Address 19381 Via Real Drive
 City Saratoga State CA Zip Code 95070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation Retired RN, Bsn, Ms
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3127707
 Amount of Each Receipt this Period
 100.00

C. Ms. Bonnie McCay-Merritt
 Full Name (Last, First, Middle Initial)
 Mailing Address 823 Meadow Road
 City Bridgewater State NJ Zip Code 08807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rutgers University Occupation University professor
 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
 12 / 28 / 2011
Transaction ID : 3137430
 Amount of Each Receipt this Period
 20.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 145.00 |
| 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 474 OF 2452 |
| | <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 A A. McClelland | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 7813 Accotink PI | | Transaction ID : 3129030 |
| City Alexandria | State VA | Zip Code 22308 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 20.00 | |
| 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 ▼ 220.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Mrs. Marge McClurg | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2011 |
| Mailing Address 2607 Stratford Dr. | | Transaction ID : 3134073 |
| City Austin | State TX | Zip Code 78746 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 300.00 | |
| Name of Employer REQUESTED | Occupation Homemaker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 975.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Ms. Sylvia McCollor | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 19 S. 1st Street, Apt. B1201 | | Transaction ID : 3128726 |
| City Minneapolis | State MN | Zip Code 55401 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 20.00 | |
| Name of Employer State of MN | Occupation Unit Supervisor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 220.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 340.00 |
| 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 475 OF 2452 |
| | <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. Joan McConkey
Full Name (Last, First, Middle Initial)
Mailing Address 4860 Sioux Drive

| | | |
|-----------------|-------------|-------------------|
| City Boulder | State CO | Zip Code 80303 |
|-----------------|-------------|-------------------|

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 ▼
562.50

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 21 | / | 2011 |

Transaction ID : 3133594

Amount of Each Receipt this Period
100.00

B. Ms. Joan McConkey
Full Name (Last, First, Middle Initial)
Mailing Address 4860 Sioux Drive

| | | |
|-----------------|-------------|-------------------|
| City Boulder | State CO | Zip Code 80303 |
|-----------------|-------------|-------------------|

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 ▼
562.50

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 30 | / | 2011 |

Transaction ID : 3138456

Amount of Each Receipt this Period
50.00

C. Dr. Jean A. McConochie
Full Name (Last, First, Middle Initial)
Mailing Address 670 W End Ave., Apt. 9A

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10025 |
|------------------|-------------|-------------------|

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 ▼
325.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2011 |

Transaction ID : 3133409

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 250.00 |
| 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 476 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Ms. Cynthia McCorkle | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2011 |
| Mailing Address 5018 E. 11th St. | | Transaction ID : 3130896 |
| City Indianapolis | State IN | Zip Code 46201 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100.00 | |
| Name of Employer Sedona Learning Solutions | Occupation instructional design | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 290.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Ms. Nina R. R. McCoy | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 3 Ha Hoi Street | | Transaction ID : 3127708 |
| City Ha Noi | State NO | Zip Code 00000 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 250.00 | |
| Name of Employer Social Science Research Council | Occupation Public Health Specia | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 375.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Ms. Carolyn McCurry | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 17 Howard Pl. | | Transaction ID : 3129852 |
| City Weaverville | State NC | Zip Code 28787 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 20.00 | |
| 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 ▼ 215.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 370.00 |
| 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 477 OF 2452 |
| | <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. Carolyn McCurry

Mailing Address 17 Howard Pl.

City Weaverville State NC Zip Code 28787

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 ▼ **215.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : 3132126

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
B. Ms. Carolyn A McDade

Mailing Address 25 Woodridge Road

City Orleans State MA Zip Code 02653

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

Name of Employer self-employed Occupation retreat leader retir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2011

Transaction ID : 3130453

Amount of Each Receipt this Period
40.00

Full Name (Last, First, Middle Initial)
C. Ms. Carolyn A McDade

Mailing Address 25 Woodridge Road

City Orleans State MA Zip Code 02653

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

Name of Employer self-employed Occupation retreat leader retir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2011

Transaction ID : 3136753

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **90.00**

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 478 OF 2452
(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. Sarah S McDermott
 Full Name (Last, First, Middle Initial)
 Mailing Address 4389 Malia St. #603
 City Honolulu State HI Zip Code 96821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: retired Occupation: homemaker/Profession
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 25 / 2011
Transaction ID : 3135641
 Amount of Each Receipt this Period
 25.00

B. Ms. Ruth McDiarmid
 Full Name (Last, First, Middle Initial)
 Mailing Address 2936 UPTON ST NW
 City Washington State DC Zip Code 20008
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130454
 Amount of Each Receipt this Period
 500.00

C. Ms. Polly McDonald
 Full Name (Last, First, Middle Initial)
 Mailing Address 1107 Arcadia Avenue
 City Austin State TX Zip Code 78757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Railroad Commission TX Occupation: Lawyer
 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
 12 / 15 / 2011
Transaction ID : 3129050
 Amount of Each Receipt this Period
 25.00

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 479 OF 2452 |
| | <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. Margaret McDonald
Full Name (Last, First, Middle Initial)
Mailing Address 918 Harliss Avenue
City San Jose State CA Zip Code 95110
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation alternative health c
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt 12 / 07 / 2011
Transaction ID : 3123782
Amount of Each Receipt this Period 20.00

B. Ms. Virginia McDonnell
Full Name (Last, First, Middle Initial)
Mailing Address 29 Henry St
City Succasunna State NJ Zip Code 07876
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 ▼ 240.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129162
Amount of Each Receipt this Period 20.00

C. Ms. Virginia H H. McDougale
Full Name (Last, First, Middle Initial)
Mailing Address 5935 N High St Apt 108
City Worthington State OH Zip Code 43085
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 ▼ 240.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3128753
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 480 OF 2452 |
| | <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. Marge E. McDowell
 Full Name (Last, First, Middle Initial)
 Mailing Address 13900 Marquesas Way Apt 3410
 Apt. 3410
 City Marina Del Rey State CA Zip Code 90292
 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 ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2011
Transaction ID : 3130455
 Amount of Each Receipt this Period
 100.00

B. Ms. Dusa McDuff
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Laurel Ln
 City Setauket State NY Zip Code 11733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Barnard College Occupation Professor
 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
 12 / 21 / 2011
Transaction ID : 3133964
 Amount of Each Receipt this Period
 50.00

C. Ms. Sharon L. McEvoy
 Full Name (Last, First, Middle Initial)
 Mailing Address 2725E 12TH Avenue
 City Spokane State WA Zip Code 99202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Planned Parenthood Occupation ARAP
 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
 12 / 15 / 2011
Transaction ID : 3128871
 Amount of Each Receipt this Period
 25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 175.00 |
| 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 481 OF 2452 |
| | <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. Richard Mcevoy

Mailing Address 4506 Monument Avenue

| | | |
|------------------|-------------|-------------------|
| City Richmond | State VA | Zip Code 23230 |
|------------------|-------------|-------------------|

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 ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3124949

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Ms. Virginia McEwen

Mailing Address 133 Lancaster St.

| | | |
|----------------|-------------|-------------------|
| City Albany | State NY | Zip Code 12210 |
|----------------|-------------|-------------------|

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

| | |
|--------------------------------------|-------------------------|
| Name of Employer One River Grants | Occupation Librarian |
|--------------------------------------|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3135197

Amount of Each Receipt this Period
200.00

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

Mailing Address 4423 Lively Ln

| | | |
|----------------|-------------|-------------------|
| City Dallas | State TX | Zip Code 75220 |
|----------------|-------------|-------------------|

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

| | |
|-------------------------------|-------------------------|
| Name of Employer REQUESTED | Occupation Housewife |
|-------------------------------|-------------------------|

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
 12 / 09 / 2011
Transaction ID : 3125646

Amount of Each Receipt this Period
1000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1220.00 |
| 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 482 OF 2452
(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. Alice McGee

Mailing Address 308 S. Graham St

City State Zip Code
Pittsburgh PA 15232

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

Name of Employer Occupation
Complete Access Intravenous servicesin semi-retired RN

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
12 / 12 / 2011

Transaction ID : 3126128

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. D E McGill

Mailing Address POB 619

City State Zip Code
Bayfield CO 81122

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 ▼ **810.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2011

Transaction ID : 3131035

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Ms. Gretchen F McGinley

Mailing Address 803 Annan Terrace

City State Zip Code
Los Angeles CA 90042

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

Name of Employer Occupation
County of Los Angeles Hospital Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : 3129053

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional)..... ► **180.00**

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 483 OF 2452 |
| | <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. Emily L. McGregor
 Full Name (Last, First, Middle Initial)
 Mailing Address 205 Conner Drive Apt. 10
 City Chapel Hill State NC Zip Code 27514
 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 **220.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128694
 Amount of Each Receipt this Period
200.00

B. Anne McGuirk
 Full Name (Last, First, Middle Initial)
 Mailing Address 5610 Wisconsin Avenue
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer International Monetary Fund Occupation Economist, retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 03 / 2011
Transaction ID : 3119935
 Amount of Each Receipt this Period
1000.00

C. Ms. Jane Tucker McHugh
 Full Name (Last, First, Middle Initial)
 Mailing Address 3580 Shaw Ave., Apt. 230
 City Cincinnati State OH Zip Code 45208
 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 **400.68**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132001
 Amount of Each Receipt this Period
125.00

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1145.00 |
| 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 484 OF 2452 |
| | <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. John McKillop
Full Name (Last, First, Middle Initial)
Mailing Address 10442 SE Eastmont Dr.
City Damascus State OR Zip Code 97089
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 **400.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 19 / 2011
Transaction ID : 3131971
Amount of Each Receipt this Period
50.00

B. Ms. Ione McKnight
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 944
City Republic State WA Zip Code 99166
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 **490.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 16 / 2011
Transaction ID : 3131559
Amount of Each Receipt this Period
140.00

C. Ms. Mary Alice McLarty
Full Name (Last, First, Middle Initial)
Mailing Address 6407 Clubhouse Cir
City Dallas State TX Zip Code 75240
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation lawyer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **900.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 06 / 2011
Transaction ID : 3122715
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... **290.00**
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 485 OF 2452
(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. Laurel McLaughlin
 Full Name (Last, First, Middle Initial)
 Mailing Address Box 70019
 City Fairbanks State AK Zip Code 99707
 Date of Receipt 12 / 15 / 2011
Transaction ID : 3128658
 Amount of Each Receipt this Period 300.00
 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 385.00

B. Joseph McLean
 Full Name (Last, First, Middle Initial)
 Mailing Address 5102 Yuma Pl NW
 City Washington State DC Zip Code 20016
 Date of Receipt 12 / 16 / 2011
Transaction ID : 3130465
 Amount of Each Receipt this Period 500.00
 FEC ID number of contributing federal political committee. C
 Name of Employer McLean/Clark, LLC Occupation Public Affairs Consu
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 500.00

C. Mr. Dennis McMenimen
 Full Name (Last, First, Middle Initial)
 Mailing Address 2227 Washington Ave SE
 City Cedar Rapids State IA Zip Code 52403
 Date of Receipt 12 / 13 / 2011
Transaction ID : 3126351
 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 650.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 780.00
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 486 OF 2452
(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. Eileen McQuade

Mailing Address 138 Celilo St

City State Zip Code
Flagstaff AZ 86001

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

Name of Employer Occupation
Castle Dental REQUESTED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
229.40

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2011
Transaction ID : 3126250

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
B. Mrs. Barbara D. McSpadden

Mailing Address 46 Carriglea Drive

City State Zip Code
Riverside CT 06878

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 ▼
260.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011
Transaction ID : 3128659

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Ms. Joanne McSparran

Mailing Address 364 N. Market St

City State Zip Code
Elizabethown PA 17022

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 ▼
320.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011
Transaction ID : 3132154

Amount of Each Receipt this Period
195.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 370.00

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 487 OF 2452 |
| | <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 McVay
Full Name (Last, First, Middle Initial)
Mailing Address 3663 W. 1050 N.
City Tangier State IN Zip Code 47952
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 **220.00**

Date of Receipt **12 / 28 / 2011**
Transaction ID : 3137595
Amount of Each Receipt this Period **12.00**

B. Eugene Meade
Full Name (Last, First, Middle Initial)
Mailing Address 8872 Windsor Road
City Windsor State CA Zip Code 95492
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 **700.00**

Date of Receipt **12 / 31 / 2011**
Transaction ID : 3139214
Amount of Each Receipt this Period **25.00**

C. Mrs. Karen E Meadow
Full Name (Last, First, Middle Initial)
Mailing Address 2304 South Road
City Baltimore State MD Zip Code 21209
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Nonprofit Consultant
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **12 / 16 / 2011**
Transaction ID : 3130470
Amount of Each Receipt this Period **150.00**

SUBTOTAL of Receipts This Page (optional)..... **187.00**
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 488 OF 2452
(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. Cary Meer
 Full Name (Last, First, Middle Initial)
 Mailing Address 5409 Center St
 City Chevy Chase State MD Zip Code 20815
 Date of Receipt: 12 / 14 / 2011
Transaction ID : 3127273
 Amount of Each Receipt this Period: 1000.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: K&L Gates LLP Occupation: Partner/Attorney
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 2300.00

B. Ms. Joanne Meirovitz
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 Bay State Rd., Apt. 8
 City Boston State MA Zip Code 02215
 Date of Receipt: 12 / 27 / 2011
Transaction ID : 3134724
 Amount of Each Receipt this Period: 140.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: JM Designs Inc. Occupation: Designer
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 265.00

C. Mr. Gerald Meisner
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Deerwood Court
 City Greensboro State NC Zip Code 27410
 Date of Receipt: 12 / 15 / 2011
Transaction ID : 3129553
 Amount of Each Receipt this Period: 20.00
 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: 240.00

SUBTOTAL of Receipts This Page (optional).....▶ 1160.00
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 489 OF 2452 |
| | <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 Meister | | Date of Receipt |
| Mailing Address 2457 Hill St. | | <input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Santa Monica | CA | 90405 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3121602 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| City of Santa Monica | Administrator | <input type="text" value="93.75"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="243.75"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Suzanne R. Mellen | | Date of Receipt |
| Mailing Address 70 Cypress Hollow Drive | | <input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Tiburon | CA | 94920 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3124832 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| HVS | Executive | <input type="text" value="100.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="600.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Margaret C Melnick | | Date of Receipt |
| Mailing Address 10261 Nick Way | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Elk Grove | CA | 95757 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3128625 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| n/a | retired | <input type="text" value="30.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="360.00"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="223.75"/> |
| 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 490 OF 2452
(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. Linda Melski
 Full Name (Last, First, Middle Initial)
 Mailing Address 1136 W Ives St.
 City Marshfield State WI Zip Code 54449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation housewife
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 311.88

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131958
 Amount of Each Receipt this Period
 140.00

B. Ms. Catherine Mendelsohn
 Full Name (Last, First, Middle Initial)
 Mailing Address 6801 N Dundedin Pl.
 City Tucson State AZ Zip Code 85718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U of AZ Occupation Career Counselor
 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
 12 / 05 / 2011
Transaction ID : 3120088
 Amount of Each Receipt this Period
 100.00

C. Ms. Melinda M Mendelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 7750 Silverado Trl.
 City Napa State CA Zip Code 94558
 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 ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131420
 Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 365.00
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 491 OF 2452 |
| | <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. Martin Mendelson
Full Name (Last, First, Middle Initial)

Mailing Address 1585 NW 117th Court

City Portland State OR Zip Code 97229

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

Name of Employer Self Occupation Consultant

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
 12 / 23 / 2011

Transaction ID : 3135626

Amount of Each Receipt this Period
 25.00

B. Ms. Kristin L. Menon
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 7136

City Redwood City State CA Zip Code 94063

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

Name of Employer Johnson & Johnson Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2011

Transaction ID : 3135629

Amount of Each Receipt this Period
 20.00

C. Ms. Betty Menzi
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 128

City Cross Village State MI Zip Code 49723

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 ▼ 288.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3128530

Amount of Each Receipt this Period
 24.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 69.00

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 492 OF 2452 |
| | <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. Adina Merenlender

Mailing Address 453 Mendocino Dr

| | | |
|---------------|-------------|-------------------|
| City Ukiah | State CA | Zip Code 95482 |
|---------------|-------------|-------------------|

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 ▼
276.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 13 | / | 2011 |

Transaction ID : 3126479

Amount of Each Receipt this Period
126.00

Full Name (Last, First, Middle Initial)
B. Ms. Ann Merrill

Mailing Address 100 Old Polly Drummond Road

| | | |
|----------------|-------------|-------------------|
| City Newark | State DE | Zip Code 19711 |
|----------------|-------------|-------------------|

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129318

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Ms. Frances M. Merryman

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 Northern Trust, NA | Occupation Wealth Strategist |
|--|---------------------------------|

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128255

Amount of Each Receipt this Period
250.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 401.00 |
| 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 493 OF 2452 |
| | (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. Mr. Jerome Mertz | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 275 Beacon Street | | Transaction ID : 3129484 |
| City Boston | State MA | Zip Code 02116 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 20.00 |
| 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 ▼ 240.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Sally Merwin | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address C/O Gay Merwin 929 West End Avenue | | Transaction ID : 3129556 |
| City New York | State NY | Zip Code 10025 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| 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 ▼ 300.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Sheila Messina | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 5272 Meridian Avenue | | Transaction ID : 3128968 |
| City San Jose | State CA | Zip Code 95118 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| Name of Employer Self | Occupation RN | |
| 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).....▶ | 70.00 |
| 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 494 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Mr. Henry Metzger
 Full Name (Last, First, Middle Initial)
 Mailing Address 3410 Taylor St
 City Chevy Chase State MD Zip Code 20815
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133257
 Amount of Each Receipt this Period
 200.00

B. Ms. Colette Meunier
 Full Name (Last, First, Middle Initial)
 Mailing Address 564 Sandy Way
 City Benicia State CA Zip Code 94510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self and LSA Assoc Occupation City Planner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2011
Transaction ID : 3125785
 Amount of Each Receipt this Period
 12.00

C. Mr. Harold Y. Meyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 W Rand Rd., Apt. 428
 City Arlington Heights State IL Zip Code 60004
 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 ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132182
 Amount of Each Receipt this Period
 30.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 242.00 |
| 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 495 OF 2452
(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. Mary T. Meyer

Mailing Address 117 Holly Forest

City Nashville State TN Zip Code 37221

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 ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128513

Amount of Each Receipt this Period
25.00

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

Mailing Address 1 Choctaw Ln.

City Greenwich State CT Zip Code 06831

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
 12 / 22 / 2011
Transaction ID : 3134124

Amount of Each Receipt this Period
300.00

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

Mailing Address 50 Hayfields Rd.

City Portola Valley State CA Zip Code 94028

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

Name of Employer Self Occupation ADULT EDUCATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **680.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2011
Transaction ID : 3125756

Amount of Each Receipt this Period
85.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **410.00**

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 496 OF 2452
(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. Beatrice N. Meyers
 Full Name (Last, First, Middle Initial)
 Mailing Address 3634 Nettle Creek Court
 City Holiday State FL Zip Code 34691
 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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128830
 Amount of Each Receipt this Period
 25.00

B. Ms. Vicki N. Meyers-Wallen
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 Redwood Ln.
 City Ithaca State NY Zip Code 14850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cornell University Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134388
 Amount of Each Receipt this Period
 200.00

C. Ms. Marilyn J. Michaelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 Valley Road
 City San Carlos State CA Zip Code 94070
 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 ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3127186
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00
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 497 OF 2452 |
| | <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. Peyton Middleton
Full Name (Last, First, Middle Initial)
Mailing Address 4510 Shoalwood Ave.
City Austin State TX Zip Code 78756
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 ▼ 305.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3132111
Amount of Each Receipt this Period 55.00

B. Ms. Joan Middleton
Full Name (Last, First, Middle Initial)
Mailing Address 3920 Grand #100
City Des Moines State IA Zip Code 50312
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 ▼ 425.00

Date of Receipt 12 / 16 / 2011
Transaction ID : 3130479
Amount of Each Receipt this Period 100.00

C. Madalene Mielke
Full Name (Last, First, Middle Initial)
Mailing Address 625 3rd St. NE #2
City Washington State DC Zip Code 20002
FEC ID number of contributing federal political committee. **C**
Name of Employer Principal Occupation Navigare Strategy Gr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 07 / 2011
Transaction ID : 3123595
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1155.00
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 498 OF 2452 |
| | <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. Gretchen Mieszkowski
Full Name (Last, First, Middle Initial)
Mailing Address 4023 Manorfield Drive
City Seabrook State TX Zip Code 77586
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 **337.00**

Date of Receipt
12 / 11 / 2011
Transaction ID : 3125774
Amount of Each Receipt this Period
35.00

B. Ms. Kathy Ann Milholland
Full Name (Last, First, Middle Initial)
Mailing Address 3601 Wisconsin Ave. NW, Apt. 6 Apt. 605
City Washington State DC Zip Code 20016
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
12 / 29 / 2011
Transaction ID : 3135231
Amount of Each Receipt this Period
125.00

C. Ms. Audrey Miller
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 888
City Ferndale State CA Zip Code 95536
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 **240.00**

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129064
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... **180.00**
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 499 OF 2452
(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. Ronnie Miller

Mailing Address 9421 S. Park Avenue

City State Zip Code
Tacoma WA 98444

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 ▼
340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3137633

Amount of Each Receipt this Period
300.00

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

Mailing Address 4473 Amiens Ave.

City State Zip Code
Fremont CA 94555

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 ▼
440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3127742

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C. Mr. John N. Miller

Mailing Address 160 Kendal Dr., Apt. 1031

City State Zip Code
Lexington VA 24450

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 ▼
485.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132079

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.00

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 500 OF 2452
(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. Althea L Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 1520 10th Street
 City Manhattan Beach State CA Zip Code 90266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Miller & Company Reporters Occupation court reporter
 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
 12 / 20 / 2011
Transaction ID : 3133132
 Amount of Each Receipt this Period
 100.00

B. Ms. Susan Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 1417 Grove Ave.
 City Richmond State VA Zip Code 23220
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134830
 Amount of Each Receipt this Period
 125.00

C. Ms. Marcia Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 54 Cree Point Drive
 City Mankato State MN Zip Code 56001
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2011
Transaction ID : 3131098
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 245.00
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 501 OF 2452 |
| | <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. Rebecca Miller
Full Name (Last, First, Middle Initial)
Mailing Address 41 W 10th St
City New York State NY Zip Code 10011
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
12 / 07 / 2011
Transaction ID : 3123320
Amount of Each Receipt this Period
250.00

B. Ms. Barbara Miller
Full Name (Last, First, Middle Initial)
Mailing Address 1420 Santo Domingo Avenue # 229
City Duarte State CA Zip Code 91010
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 285.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123744
Amount of Each Receipt this Period
5.00

C. Ms. Marian Miller
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 330577
City San Francisco State CA Zip Code 94133
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
12 / 12 / 2011
Transaction ID : 3125443
Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... **1255.00**
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 502 OF 2452 |
| | <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. Regina Gouger Miller | | Date of Receipt |
| Mailing Address 211 N Tulpehocken Rd. | | <input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Reading | PA | 19601 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3131436 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| Self | Artist | <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="800.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Dr. Carol A. Miller | | Date of Receipt |
| Mailing Address 38 Schooner Hill Road | | <input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Oakland | CA | 94618 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3126992 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| Univ. of California SF-Med. Cntr. | Physician | <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. Alison H. Miller | | Date of Receipt |
| Mailing Address 41 Windsor Dr. | | <input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Princeton Junction | NJ | 08550 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3135124 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| West Windsor Township | Council Member | <input type="text" value="100.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="325.00"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="900.00"/> |
| 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 503 OF 2452 |
| | <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 Millin
Full Name (Last, First, Middle Initial)
Mailing Address 1944 Emerson St
City Palo Alto State CA Zip Code 94301
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 12 / 08 / 2011
Transaction ID : 3123967
Amount of Each Receipt this Period 100.00

B. 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 n/a Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3132436
Amount of Each Receipt this Period 350.00

C. Ms. Jocelyn Mini
Full Name (Last, First, Middle Initial)
Mailing Address 2364 Hartland Parkside Dr.
City Lexington State KY Zip Code 40515
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 ▼ 325.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3132233
Amount of Each Receipt this Period 125.00

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 504 OF 2452 |
| | <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. Dr. Paul Mintz | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 3129045 |
| Mailing Address 200 Reading Blvd | | Amount of Each Receipt this Period 20.00 |
| City Wyomissing | State PA | Zip Code 19610 |
| FEC ID number of contributing federal political committee. C | Name of Employer Reading Anesthesia Assoc | Occupation Anesthesiologist |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Marilyn Miracle | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 3128826 |
| Mailing Address 359 Greenbriar Road | | Amount of Each Receipt this Period 20.00 |
| City Lexington | State KY | Zip Code 40503 |
| FEC ID number of contributing federal political committee. C | Name of Employer n/a | Occupation Retired |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Julia Ann A. Misplon | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 3129112 |
| Mailing Address 806 Hudson Avenue | | Amount of Each Receipt this Period 20.00 |
| City Takoma Park | State MD | Zip Code 20912 |
| FEC ID number of contributing federal political committee. C | Name of Employer US Government | Occupation Microbiologist |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 60.00 |
| 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 505 OF 2452 |
| | <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. Nancy C. Mitchell
Full Name (Last, First, Middle Initial)

Mailing Address 1701 E 91st St

City Chicago State IL Zip Code 60617

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

Name of Employer Self Occupation Consultant

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
 12 / 15 / 2011

Transaction ID : 3128924

Amount of Each Receipt this Period
 25.00

B. Ms. Sylvia C. Mitchell
Full Name (Last, First, Middle Initial)

Mailing Address 1111 Wilder Ave., Apt. 16A

City Honolulu State HI Zip Code 96822

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

Name of Employer State of Hawaii Occupation Librarian

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 382.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3133448

Amount of Each Receipt this Period
 50.00

C. Ms. Sally Mitchell
Full Name (Last, First, Middle Initial)

Mailing Address 17 W Phil Ellena St.

City Philadelphia State PA Zip Code 19119

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

Name of Employer Temple University Occupation Professor

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
 12 / 15 / 2011

Transaction ID : 3129796

Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

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 506 OF 2452
(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. Sue Mizrahi

Mailing Address 7 Jason Lane

City Mamaroneck State NY Zip Code 10543

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

Name of Employer hwzoa Occupation volunteer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
236.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3132915

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. Ms. Mary Mogge

Mailing Address 638 Farben Drive

City Diamond Bar State CA Zip Code 91765

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

Name of Employer Cal Poly Pomona Occupation University Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128097

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
C. Ms. Elizabeth B Mohr

Mailing Address 205 Blue Ridge Road

City Ruckersville State VA Zip Code 22968

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 ▼
510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126742

Amount of Each Receipt this Period
 100.00

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 507 OF 2452 |
| | <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. Carol Moldaw | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2011 |
| Mailing Address 29 Jacona Road | | Transaction ID : 3133774 |
| City Santa Fe | State NM | Zip Code 87506 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer Self | Occupation Writer | Amount of Each Receipt this Period 2500.00 |
| 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. Mrs. Margaret R R. Monaghan | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address POB 131402 | | Transaction ID : 3128393 |
| City Birmingham | State AL | Zip Code 35213 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer n/a | Occupation housewife | Amount of Each Receipt this Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1100.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Becky A. Moncur | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address 14078 Mahogan Avenue | | Transaction ID : 3134534 |
| City Jacksonville | State FL | Zip Code 32258 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer n/a | Occupation Retired | Amount of Each Receipt this Period 250.00 |
| 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).....▶ | 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 508 OF 2452 |
| | <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. Joan Monroe | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 |
| Mailing Address 2731 Dunbar Ave | | Transaction ID : 3135522 |
| City Fort Collins | State CO | Zip Code 80526 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 125.00 |
| Name of Employer none | Occupation non-practticing RN | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1850.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Wendelin Montciel | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2011 |
| Mailing Address 112 ALLERTON STREET | | Transaction ID : 3132917 |
| City Santa Cruz | State CA | Zip Code 95065 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 35.00 |
| Name of Employer UC | Occupation retired designer/edu | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 205.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Elizabeth Montgomery | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 26 Union Avenue | | Transaction ID : 3129184 |
| City Norwalk | State CT | Zip Code 06851 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 30.00 |
| Name of Employer self employed | Occupation writer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 360.00 | |

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 190.00 |
| 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 509 OF 2452
(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 Moog
 Full Name (Last, First, Middle Initial)
 Mailing Address 6211 Cove Creek Ct
 City Burr Ridge State IL Zip Code 60527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Argonne National Lab Occupation Physicist
 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
 12 / 31 / 2011
Transaction ID : 3138934
 Amount of Each Receipt this Period
 250.00

B. Ms. Diane J. Moore
 Full Name (Last, First, Middle Initial)
 Mailing Address 1610 Sycamore Lane
 City Davis State CA Zip Code 95616
 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 ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3132919
 Amount of Each Receipt this Period
 100.00

C. Ms. Marian F F Moore
 Full Name (Last, First, Middle Initial)
 Mailing Address 4545 Twig Avenue
 City Sebastopol State CA Zip Code 95472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Marin County Occupation nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129457
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 370.00
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 510 OF 2452 |
| | <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 D. Moore
Full Name (Last, First, Middle Initial)
Mailing Address 83 Via Descanso

| | | |
|------------------|-------------|-------------------|
| City Monterey | State CA | Zip Code 93940 |
|------------------|-------------|-------------------|

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 ▼
235.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3134569

Amount of Each Receipt this Period
125.00

B. Ms. Frances C. Moore
Full Name (Last, First, Middle Initial)
Mailing Address 3500 Bradley St.

| | | |
|---------------------|-------------|-------------------|
| City Bloomington | State IN | Zip Code 47401 |
|---------------------|-------------|-------------------|

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

| | |
|-------------------------------|-------------------------|
| Name of Employer REQUESTED | Occupation housewife |
|-------------------------------|-------------------------|

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 |
| 12 | / | 12 | / | 2011 |

Transaction ID : 3125409

Amount of Each Receipt this Period
100.00

C. Ms. Ann D Moorefield
Full Name (Last, First, Middle Initial)
Mailing Address 306 South Owens Street

| | | |
|-----------------|-------------|-------------------|
| City Clinton | State SC | Zip Code 29325 |
|-----------------|-------------|-------------------|

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

| | |
|--|---------------------------------|
| Name of Employer Presbyterian College | Occupation retired professor |
|--|---------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128817

Amount of Each Receipt this Period
20.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 245.00 |
| 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 511 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Diana L Morabito
 Full Name (Last, First, Middle Initial)
 Mailing Address 1976 Abinante Lane
 City San Jose State CA Zip Code 95124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PricewaterhouseCoopers, LLP Occupation Software Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128628
 Amount of Each Receipt this Period
 30.00

B. Ms. Barbara H. Morgan
 Full Name (Last, First, Middle Initial)
 Mailing Address 5231 James Ave.
 City Oakland State CA Zip Code 94618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Univ. CA-Berkeley Occupation Manager
 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
 12 / 27 / 2011
Transaction ID : 3134480
 Amount of Each Receipt this Period
 500.00

C. Ms. Karen Morgan
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 Georgetown Ct
 City Dearborn State MI Zip Code 48126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer university of michigan-dearborn Occupation librarian
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128145
 Amount of Each Receipt this Period
 50.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 580.00 |
| 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 512 OF 2452
(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. TIMOTHY MORIARTY
 Full Name (Last, First, Middle Initial)
 Mailing Address 142 BELVIDERE STREET
 City SPRINGFIELD State MA Zip Code 01108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BAYSTATE HEALTH Occupation MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3138935
 Amount of Each Receipt this Period
 250.00

B. Ms. Joyce Morimoto
 Full Name (Last, First, Middle Initial)
 Mailing Address 3217 Otto Ln.
 City Evanston State IL Zip Code 60201
 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 ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 3125474
 Amount of Each Receipt this Period
 150.00

C. Ms. Janice L Moritz
 Full Name (Last, First, Middle Initial)
 Mailing Address 756 Plantation DR
 City Titusville State FL Zip Code 32780
 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 ▼ 220.12

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3125215
 Amount of Each Receipt this Period
 120.12

SUBTOTAL of Receipts This Page (optional)..... ▶ 520.12
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 513 OF 2452 |
| | <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. Mrs. Carolee W. Morris
 Full Name (Last, First, Middle Initial)
 Mailing Address 6497 Walden Pond Lane
 City Southport State NC Zip Code 28461
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134637
 Amount of Each Receipt this Period
 50.00

B. Ms. Jean Morris
 Full Name (Last, First, Middle Initial)
 Mailing Address 1610 12th ave. west Apt. 2
 City Seattle State WA Zip Code 98119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Adventure Divas, Inc. Occupation partner/exec. produc
 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
 12 / 07 / 2011
Transaction ID : 3123603
 Amount of Each Receipt this Period
 50.00

C. Ms. Cynthia S. Morris
 Full Name (Last, First, Middle Initial)
 Mailing Address 11125 117th St.
 City Largo State FL Zip Code 33778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CBIZ Occupation CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134553
 Amount of Each Receipt this Period
 140.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 240.00 |
| 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 514 OF 2452 |
| | <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. Peter Morris
Full Name (Last, First, Middle Initial)
Mailing Address 3224 Doulton Ln
City Fuquay Varina State NC Zip Code 27526
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 **205.00**

Date of Receipt **12 / 18 / 2011**
Transaction ID : 3131295
Amount of Each Receipt this Period **35.00**

B. Ms. Mary F. Morrison
Full Name (Last, First, Middle Initial)
Mailing Address 466 Ballytore Rd.
City Wynnewood State PA Zip Code 19096
FEC ID number of contributing federal political committee. **C**
Name of Employer Temple U Occupation MD
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **525.00**

Date of Receipt **12 / 16 / 2011**
Transaction ID : 3131514
Amount of Each Receipt this Period **125.00**

C. Ms. Valerie A. Morrison
Full Name (Last, First, Middle Initial)
Mailing Address 7614 York Avenue South Apt. 33 Unit 1506
City Minneapolis State MN Zip Code 55435
FEC ID number of contributing federal political committee. **C**
Name of Employer Wells Fargo Occupation Real Estate Appraiser
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **240.00**

Date of Receipt **12 / 15 / 2011**
Transaction ID : 3129090
Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **180.00**
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 515 OF 2452 |
| | <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. Corinne Morrissey | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 17 / 2011 |
| Mailing Address 5490 South Shore Drive | | Transaction ID : 3130496 |
| City Chicago | State IL | Zip Code 60615 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 350.00 | |
| Name of Employer john marshall law school | Occupation lawyer/professor | |
| 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) B. Ms. Sandra Moskowitz | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 417 Alderbrook Dr | | Transaction ID : 3128612 |
| City Wayne | State PA | Zip Code 19087 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25.00 | |
| Name of Employer Freelance With Walt Disney | Occupation Adv Svcs. Dir. | |
| 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. Marian M. Moss | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 18 / 2011 |
| Mailing Address 5328 Siesta Court | | Transaction ID : 3130851 |
| City Sarasota | State FL | Zip Code 34242 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100.00 | |
| Name of Employer C.O.M. of Sarasota, Inc. | Occupation Property Manager | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 900.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 160.00 |
| 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 516 OF 2452 |
| | <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. Mr. Alvin Mottley
 Full Name (Last, First, Middle Initial)
 Mailing Address 6367 Gothards Lane
 City Douglasville State GA Zip Code 30134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MHM Services, Inc. Occupation HEALTH CARE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2011
Transaction ID : 3130498
 Amount of Each Receipt this Period
 100.00

B. Ms. Elizabeth Moulton
 Full Name (Last, First, Middle Initial)
 Mailing Address 109 Crusier St
 City Montrose State PA Zip Code 18801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Episcopal Priest
 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
 12 / 13 / 2011
Transaction ID : 3127053
 Amount of Each Receipt this Period
 50.00

C. Ms. Martha Mountain
 Full Name (Last, First, Middle Initial)
 Mailing Address 1444 Church St NW #401
 City Washington State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer various entertainment employers Occupation theatre professional
 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
 12 / 28 / 2011
Transaction ID : 3136808
 Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 250.00 |
| 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 517 OF 2452 |
| | <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. Nancy A. Mower
 Full Name (Last, First, Middle Initial)
 Mailing Address 1536 Kamole Street
 City Honolulu State HI Zip Code 96821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Writer/Editor
 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
 12 / 20 / 2011
Transaction ID : 3132926
 Amount of Each Receipt this Period
 100.00

B. Mr. Richard Moyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Manchester Ct.
 City Berwyn State PA Zip Code 19312
 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 ▼ 232.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129821
 Amount of Each Receipt this Period
 50.00

C. Ms. Elizabeth Moynihan
 Full Name (Last, First, Middle Initial)
 Mailing Address 58 Washington Avenue
 City Cambridge State MA Zip Code 02140
 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 ▼ 312.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2011
Transaction ID : 3126022
 Amount of Each Receipt this Period
 30.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 180.00 |
| 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 518 OF 2452 |
| | <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. Christine Mrak
Full Name (Last, First, Middle Initial)
Mailing Address 2357 Hobart Ave. SW
City Seattle State WA Zip Code 98116
FEC ID number of contributing federal political committee. **C**
Name of Employer Webster Mrak & Blumberg Occupation Attorney
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
12 / 31 / 2011
Transaction ID : 3138938
Amount of Each Receipt this Period
500.00

B. Mr. William R. Muenster
Full Name (Last, First, Middle Initial)
Mailing Address 901 Hinman Avenue Apt. 5E
City Evanston State IL Zip Code 60202
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 ▼ 370.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011
Transaction ID : 3119295
Amount of Each Receipt this Period
100.00

C. Mr. William R. Muenster
Full Name (Last, First, Middle Initial)
Mailing Address 901 Hinman Avenue Apt. 5E
City Evanston State IL Zip Code 60202
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 ▼ 370.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011
Transaction ID : 3128997
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 610.00
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 519 OF 2452 |
| | <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 Mulcahy
Full Name (Last, First, Middle Initial)
Mailing Address 2040 Elliott Avenue
City Nashville State TN Zip Code 37204
FEC ID number of contributing federal political committee. **C**
Name of Employer volunteer state community college Occupation professor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt
12 / 26 / 2011
Transaction ID : 3135860
Amount of Each Receipt this Period
250.00

B. Dr. Julia Muller
Full Name (Last, First, Middle Initial)
Mailing Address 800 S Hanley Rd., Apt. 4D
City Saint Louis State MO Zip Code 63105
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 **390.00**

Date of Receipt
12 / 19 / 2011
Transaction ID : 3131883
Amount of Each Receipt this Period
140.00

C. Andrew Mullhaupt
Full Name (Last, First, Middle Initial)
Mailing Address 19 Old Route 100
City Katonah State NY Zip Code 10536
FEC ID number of contributing federal political committee. **C**
Name of Employer Stony Brook University Occupation Professor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1300.00**

Date of Receipt
12 / 06 / 2011
Transaction ID : 3122915
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... **215.00**
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 520 OF 2452 |
| | <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. Hattie Jo P. Mullins | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 580 Main Street Apt. 164 | | Transaction ID : 3128568 |
| City Roosevelt Island | State NY | Zip Code 10044 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 300.00 | |
| Name of Employer Bronx Community College | Occupation Adjunct Instructor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 330.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Mrs. Silvia B. Munger | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address 2050 Pate Ridge Dr., Apt. 505 Apt. 505 | | Transaction ID : 3134532 |
| City Loganville | State GA | Zip Code 30052 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50.00 | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 490.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Ms. Jeni Munn | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 8328 Park Vista Circle | | Transaction ID : 3128930 |
| City Charlotte | State NC | Zip Code 28226 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 20.00 | |
| Name of Employer Owner, Rosewood Garden Designs | Occupation owner, landscape fir | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 220.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 100.00 |
| 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 521 OF 2452
(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 Munoz
 Full Name (Last, First, Middle Initial)
 Mailing Address 3814 Albemarle St. NW
 City Washington State DC Zip Code 20016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer River Network Occupation Manager
 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
 12 / 27 / 2011
Transaction ID : 3134493
 Amount of Each Receipt this Period
 100.00

B. Ms. Myra M. Munson
 Full Name (Last, First, Middle Initial)
 Mailing Address 142 Gastineau Ave
 City Juneau State AK Zip Code 99801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sonosky, Chambers Law Firm LLP Occupation lawyer
 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
 12 / 24 / 2011
Transaction ID : 3135526
 Amount of Each Receipt this Period
 1000.00

C. Mr. Mike Murdock
 Full Name (Last, First, Middle Initial)
 Mailing Address 1642 Lexington Street
 City Santa Clara State CA Zip Code 95050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Teacher/ Investor
 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
 12 / 15 / 2011
Transaction ID : 3129144
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1125.00
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 522 OF 2452 |
| | <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. Beatrice Murgio
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2457

| | | |
|---------------------|-------------|-------------------|
| City New Preston | State CT | Zip Code 06777 |
|---------------------|-------------|-------------------|

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 ▼
360.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129560

Amount of Each Receipt this Period
300.00

B. Dr. M. Dianne Murphy
Full Name (Last, First, Middle Initial)
Mailing Address 90 Morningside Dr., Apt. 6G

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10027 |
|------------------|-------------|-------------------|

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 ▼
325.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 19 | / | 2011 |

Transaction ID : 3132160

Amount of Each Receipt this Period
75.00

C. Ms. Sharon Murphy
Full Name (Last, First, Middle Initial)
Mailing Address 2233 Summit Ave

| | | |
|--------------------|-------------|-------------------|
| City Saint Paul | State MN | Zip Code 55105 |
|--------------------|-------------|-------------------|

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

| | |
|-----------------------------|-------------------------|
| Name of Employer U of MN | Occupation Professor |
|-----------------------------|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 05 | / | 2011 |

Transaction ID : 3121603

Amount of Each Receipt this Period
250.00

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 355.00 |
| 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 523 OF 2452 |
| | <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. Georgia Murray | | Date of Receipt |
| Mailing Address 433 Shawmut Ave | | <input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Boston | MA | 02118 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| n/a | Retired | |
| 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) ▼ | | |
| | | Amount of Each Receipt this Period |
| | | <input type="text" value="2100.00"/> |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Janet Murray | | Date of Receipt |
| Mailing Address 1735 PEACHTREE ST NE UNIT 615 Unit 615 | | <input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Atlanta | GA | 30309 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| Self-Employed | Writer | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="400.00"/> | |
| <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. Beth Myers | | Date of Receipt |
| Mailing Address 4070 W Forrest Park Dr. | | <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Bloomington | IN | 47404 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| n/a | Retired | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="682.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |
| | | Amount of Each Receipt this Period |
| | | <input type="text" value="125.00"/> |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="2325.00"/> |
| 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 524 OF 2452 |
| | <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. Nancy Myers-Bradley
Full Name (Last, First, Middle Initial)

Mailing Address 1001 Aqua Marine Blvd

City Avon Lake State OH Zip Code 44012

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 ▼ 240.00

Date of Receipt
12 / 16 / 2011
Transaction ID : 3131274

Amount of Each Receipt this Period
200.00

B. Ms. Beth Myler
Full Name (Last, First, Middle Initial)

Mailing Address 4906 Timberline

City Austin State TX Zip Code 78746

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

Name of Employer self Occupation attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3120831

Amount of Each Receipt this Period
1000.00

C. Ms. Kristin Arnold Nagel
Full Name (Last, First, Middle Initial)

Mailing Address 1215 Camp Cardinal Road

City Iowa City State IA Zip Code 52246

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 ▼ 1200.00

Date of Receipt
12 / 16 / 2011
Transaction ID : 3130839

Amount of Each Receipt this Period
100.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1120.00 |
| 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 525 OF 2452 |
| | <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. Karene Nagel | | Date of Receipt |
| Mailing Address 2583 180Th Ave | | <input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Milan | IL | 61264 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3121900 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="50.00"/> |
| Name of Employer | Occupation | |
| REQUESTED | REQUESTED | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="275.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Charlotte Nagoshi | | Date of Receipt |
| Mailing Address 1333 Heulu St Apt 808 | | <input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Honolulu | HI | 96822 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3123997 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="300.00"/> |
| Name of Employer | Occupation | |
| n/a | Retired | |
| 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) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Janet Napolitano | | Date of Receipt |
| Mailing Address 4200 Massachusetts Ave. NW, Ap Apt. 704 | | <input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Washington | DC | 20016 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3135121 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="140.00"/> |
| Name of Employer | Occupation | |
| State of Az | Governor | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="515.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="490.00"/> |
| 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 526 OF 2452 |
| | <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

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Ms. Jo Nardecchia | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 806 Cedar | | Transaction ID : 3128741 |
| City McKinney | State TX | Zip Code 75069 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 17.00 | |
| Name of Employer self | Occupation Clinical social Worker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 204.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Ms. Susan Nash | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 09 / 2011 |
| Mailing Address 110 Riverside drive | | Transaction ID : 3125656 |
| City New York | State NY | Zip Code 10024 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100.00 | |
| Name of Employer n/a | Occupation retired | |
| 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. Ms. Susan Nash | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 20 / 2011 |
| Mailing Address 110 Riverside drive | | Transaction ID : 3133738 |
| City New York | State NY | Zip Code 10024 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100.00 | |
| Name of Employer n/a | Occupation retired | |
| 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).....▶ | 217.00 |
| 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 527 OF 2452 |
| | <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. Shirin Nash
 Full Name (Last, First, Middle Initial)
 Mailing Address 39 Long Hill Dr.
 City Somers State CT Zip Code 06071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **BMERF** Occupation **Physician**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134435
 Amount of Each Receipt this Period
 200.00

B. Ms. Mary Naughton
 Full Name (Last, First, Middle Initial)
 Mailing Address 573 Greenwood Avenue
 City Atlanta State GA Zip Code 30308
 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 **408.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129190
 Amount of Each Receipt this Period
 34.00

C. Mrs. Franziska Naughton
 Full Name (Last, First, Middle Initial)
 Mailing Address 311 trailview rdE
 City Encinitas State CA Zip Code 92024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **State of Illinois** Occupation **Retired educator**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **700.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128399
 Amount of Each Receipt this Period
 250.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 484.00 |
| 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 528 OF 2452 |
| | <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. Joanne F. Nay
Full Name (Last, First, Middle Initial)
Mailing Address 2727 Miradero Dr #304

| | | |
|---|------------------------------------|-------------------|
| City Santa Barbara | State CA | Zip Code 93105 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 300.00 | |

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2011
Transaction ID : 3130901

Amount of Each Receipt this Period
300.00

B. Ms. Laura Neack
Full Name (Last, First, Middle Initial)
Mailing Address 631 Monroe St

| | | |
|---|------------------------------------|-------------------|
| City Newport | State KY | Zip Code 41071 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Miami University | Occupation University Professor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 275.00 | |

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2011
Transaction ID : 3130503

Amount of Each Receipt this Period
25.00

C. Ms. Annie W. Neal
Full Name (Last, First, Middle Initial)
Mailing Address 901 Leblanc Ct

| | | |
|---|------------------------------------|-------------------|
| City Nashville | State TN | Zip Code 37221 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Meharry Medical College | Occupation Retired/Educator,Adm | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | |

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2011
Transaction ID : 3135083

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 155.00 |
| 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 529 OF 2452 |
| | <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. Philip Nel
Full Name (Last, First, Middle Initial)

Mailing Address 116 N Delaware Ave

City Manhattan State KS Zip Code 66502

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
 12 / 28 / 2011

Transaction ID : 3135116

Amount of Each Receipt this Period
 250.00

B. Ms. Linda Neland
Full Name (Last, First, Middle Initial)

Mailing Address 1500 Barton Creek Blvd

City Austin State TX Zip Code 78735

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

Name of Employer retired Occupation retired psychologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011

Transaction ID : 3136005

Amount of Each Receipt this Period
 100.00

C. Mrs. Patricia A. Nell
Full Name (Last, First, Middle Initial)

Mailing Address 3164 Lake Forest Park Rd

City Sturgeon Bay State WI Zip Code 54235

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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123335

Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| 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 530 OF 2452
(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. Claire E Nelson

Mailing Address 4259 Emory Way

City State Zip Code
Livermore CA 94550

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 ▼
280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011

Transaction ID : 3126740

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
B. Ms. Katherine Nelson

Mailing Address 50 Riverside Drive #4B Apt. 4B

City State Zip Code
New York NY 10024

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 ▼
3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011

Transaction ID : 3134243

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Ms. Nicola A. Nelson

Mailing Address 90 W 500 S #242

City State Zip Code
Bountiful UT 84010

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

Name of Employer Occupation
Aerospace Corporation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2011

Transaction ID : 3119789

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1030.00

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 531 OF 2452
(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. Kenrad Nelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2417 ken oak road
 City State Zip Code
 baltimore MD 21209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 johns hopkins university physician
 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
 12 / 01 / 2011
Transaction ID : 3119128
 Amount of Each Receipt this Period
 35.00

B. Mr. Sherwood Nelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 154 Locust HI # 2
 City State Zip Code
 Frankfort KY 40601
 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 ▼
 301.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126790
 Amount of Each Receipt this Period
 17.00

C. Ms. Lynn Nelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Susie Blvd
 City State Zip Code
 Poughkeepsie NY 12603
 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 M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3139194
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 82.00
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 532 OF 2452
(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. Dianne E. Nelson

Mailing Address 2743 S Pitkin St.

City Aurora State CO Zip Code 80013

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 ▼ **675.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131503

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Ms. Cheryl Nesler

Mailing Address 78-6835 Keapuni St

City Kailua Kona State HI Zip Code 96740

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 ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : 3134305

Amount of Each Receipt this Period
40.00

Full Name (Last, First, Middle Initial)
C. Ms. Debra L Ness

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 National Partnership for Women & Famil Occupation President

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
 12 / 15 / 2011
Transaction ID : 3128256

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **390.00**

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 533 OF 2452 |
| | <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. Scott Nettles | | Date of Receipt 12 / 07 / 2011 Transaction ID : 3123606 |
| Mailing Address 1701 Barn Swallow Dr. | | Amount of Each Receipt this Period 1000.00 |
| City Austin | State TX | Zip Code 78746 |
| FEC ID number of contributing federal political committee. C | Name of Employer The University of Texas at Austin | Occupation Professor |
| 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. Pamela A. Newberry | | Date of Receipt 12 / 06 / 2011 Transaction ID : 3122786 |
| Mailing Address 5545 Huisache St | | Amount of Each Receipt this Period 10.00 |
| City Bellaire | State TX | Zip Code 77401 |
| FEC ID number of contributing federal political committee. C | Name of Employer St. Lukes Hospital | Occupation RN |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Ms. Pamela A. Newberry | | Date of Receipt 12 / 27 / 2011 Transaction ID : 3135960 |
| Mailing Address 5545 Huisache St | | Amount of Each Receipt this Period 10.00 |
| City Bellaire | State TX | Zip Code 77401 |
| FEC ID number of contributing federal political committee. C | Name of Employer St. Lukes Hospital | Occupation RN |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1020.00 |
| 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 534 OF 2452 |
| | <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. Judith Newman
Full Name (Last, First, Middle Initial)
Mailing Address 2842 Hale Dr.
City West Linn State OR Zip Code 97068
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 **260.00**

Date of Receipt
12 / 18 / 2011
Transaction ID : 3130510
Amount of Each Receipt this Period
20.00

B. Mrs. Lyris J Newman
Full Name (Last, First, Middle Initial)
Mailing Address 401 S. Royal Poinciana Drive
City Tampa State FL Zip Code 33609
FEC ID number of contributing federal political committee. **C**
Name of Employer none Occupation not employed
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt
12 / 28 / 2011
Transaction ID : 3136828
Amount of Each Receipt this Period
500.00

C. Ms. Eileen K. Newman
Full Name (Last, First, Middle Initial)
Mailing Address 3837 Cook Valley Blvd. SE
City Grand Rapids State MI Zip Code 49546
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
12 / 01 / 2011
Transaction ID : 3119351
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... **540.00**
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 535 OF 2452 |
| | <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. Harriet Nezer
Full Name (Last, First, Middle Initial)
Mailing Address 15 Mystic Lake Dr
City Arlington State MA Zip Code 02474
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Coach and consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
12 / 23 / 2011
Transaction ID : 3135531
Amount of Each Receipt this Period
100.00

B. Ms. Helen Nicholas
Full Name (Last, First, Middle Initial)
Mailing Address 22 Cape Cod
City Irvine State CA Zip Code 92620
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 ▼ 406.00

Date of Receipt
12 / 01 / 2011
Transaction ID : 3119428
Amount of Each Receipt this Period
31.00

C. Mr. Lee H. Nicholas
Full Name (Last, First, Middle Initial)
Mailing Address 204 Niagara Drive
City Waterloo State IA Zip Code 50701
FEC ID number of contributing federal political committee. **C**
Name of Employer University of Northern Iowa Occupation Accounting Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt
12 / 16 / 2011
Transaction ID : 3130915
Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 281.00
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 536 OF 2452
(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. Linda Lauren Nicholes

Mailing Address 6261 East Fox Glen Drive 4070
4070

City State Zip Code
Anaheim CA 92807

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

Name of Employer Occupation
Self Environmental Activist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : 3128728

Amount of Each Receipt this Period
500.00

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

Mailing Address 393 Madison St

City State Zip Code
Denver CO 80206

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 ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2011

Transaction ID : 3121323

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Ms. Constance Nichols

Mailing Address 8 Laurel St

City State Zip Code
Paxton MA 01612

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

Name of Employer Occupation
UMassMemorial Healthcare Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2011

Transaction ID : 3135532

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 585.00

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 537 OF 2452 |
| | <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. Jean Nilson | | Date of Receipt 12 / 06 / 2011 Transaction ID : 3122881 |
| Mailing Address 241 Hillside Ave | | Amount of Each Receipt this Period 30.00 |
| City Chatham | State NJ | Zip Code 07928 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 460.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Lela G Noble | | Date of Receipt 12 / 29 / 2011 Transaction ID : 3138188 |
| Mailing Address 4270 Manuela Way | | 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 n/a | 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) C. Ms. D Nolan | | Date of Receipt 12 / 15 / 2011 Transaction ID : 3128571 |
| Mailing Address Alameda County 3940 Randolph A Alameda County | | Amount of Each Receipt this Period 35.00 |
| City Oakland | State CA | Zip Code 94602 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Contra Costa County | Occupation Lawyer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 420.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1065.00 |
| 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 538 OF 2452
(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 Nolan
 Full Name (Last, First, Middle Initial)
 Mailing Address 470 3rd Street
 City State Zip Code
 Brooklyn NY 11215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Office Of Mental Health New York State Director Of Rehabilitation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2011
Transaction ID : 3125846
 Amount of Each Receipt this Period
 30.00

B. Ms. Sarah M Nolan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1030 Camino San Acacio
 City State Zip Code
 Santa Fe NM 87505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 self consultant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2011
Transaction ID : 3130884
 Amount of Each Receipt this Period
 100.00

C. Ms. Sarah M Nooden
 Full Name (Last, First, Middle Initial)
 Mailing Address 2148 E. Delhi Rd.
 City State Zip Code
 Ann Arbor MI 48103
 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 ▼
 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128117
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00
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 539 OF 2452 |
| | <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. Elizabeth Nordgren
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 Ryan Way
 City Durham State NH Zip Code 03824
 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
 12 / 27 / 2011
Transaction ID : 3134722
 Amount of Each Receipt this Period
 250.00

B. Ms. Cathlene Nordstrom
 Full Name (Last, First, Middle Initial)
 Mailing Address 5004 Viola Road NE
 City Rochester State MN Zip Code 55906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer IBM Occupation Software Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3135976
 Amount of Each Receipt this Period
 100.00

C. Ms. Carol W. Norton
 Full Name (Last, First, Middle Initial)
 Mailing Address 312 Windsor Drive
 City Birmingham State AL Zip Code 35209
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128772
 Amount of Each Receipt this Period
 20.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 370.00 |
| 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 540 OF 2452
(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. Edward V. Norton

Mailing Address 3163 Queens Chapel Rd., Apt. 1

City State Zip Code
Mount Rainier MD 20712

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

Name of Employer Occupation
Library of Congress Legislative Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129803

Amount of Each Receipt this Period
100.00

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

Mailing Address 126 Skassen Lane

City State Zip Code
Harpwell ME 04079

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

Name of Employer Occupation
Retired Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128404

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
C. Mr. Peter Nosler

Mailing Address 625 Hobart St

City State Zip Code
Menlo Park CA 94025

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

Name of Employer Occupation
DPR Construction Construction Mgr.

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
 12 / 01 / 2011
Transaction ID : 3119298

Amount of Each Receipt this Period
500.00

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 541 OF 2452
(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. Andrea Nouryeh

Mailing Address 85 Judson Street

City State Zip Code
Canton NY 13617

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 ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3135967

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Ms. Bettye H. Nowlin

Mailing Address 3327 Far View Drive

City State Zip Code
Austin TX 78730

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 ▼
2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130518

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Ms. Molly Oberbillig

Mailing Address 1907 Parkwood Dr SE

City State Zip Code
Olympia WA 98501

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 ▼
1180.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133158

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1120.00

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 542 OF 2452 |
| | <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. Suzanne Oberlin | | Date of Receipt |
| Mailing Address 641 Manzanita ct | | <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| corte madera | CA | 94925 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3132515 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="350.00"/> |
| Name of Employer | Occupation | |
| self | travel planner | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="900.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Barbara Oceanlight | | Date of Receipt |
| Mailing Address 3373 St. Michael Drive | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Palo Alto | CA | 94306 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3129261 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="50.00"/> |
| Name of Employer | Occupation | |
| Family & Children Services | Clinical Counselor | |
| 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) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mrs. Ellen Ochs | | Date of Receipt |
| Mailing Address E4426 County Road D | | <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Menomonie | WI | 54751 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3132042 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="100.00"/> |
| Name of Employer | Occupation | |
| n/a | Retired | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="325.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="500.00"/> |
| 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 543 OF 2452 |
| | (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. Karen O'Connor | | Date of Receipt |
| Mailing Address 4383 Westover PI NW | | <input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2011"/> |
| City Washington State DC Zip Code 20016 | | Transaction ID : 3123435 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer American University Occupation Professor | | <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="1150.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Mary O'Connor | | Date of Receipt |
| Mailing Address 7120 Twin Tree Ln | | <input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2011"/> |
| City Dallas State TX Zip Code 75214 | | Transaction ID : 3119863 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer REQUESTED Occupation REQUESTED | | <input type="text" value="30.00"/> |
| 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. Gloria O'Daniell | | Date of Receipt |
| Mailing Address 1412 Valley Forge Way | | <input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2011"/> |
| City Abingdon State MD Zip Code 21009 | | Transaction ID : 3131202 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer Broadband Partners, Inc Occupation Associate | | <input type="text" value="75.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | <input type="text" value="712.50"/> | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="1105.00"/> |
| 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 544 OF 2452 |
| | <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. Anne ODell
 Full Name (Last, First, Middle Initial)
 Mailing Address 17744 Hwy 101N
 B303
 City State Zip Code
 Brookings OR 97415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SDPD Retired cop
 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
 12 / 15 / 2011
Transaction ID : 3128748
 Amount of Each Receipt this Period
 25.00

B. Ms. Leslie Oelsner
 Full Name (Last, First, Middle Initial)
 Mailing Address 1451 Canterbury Rd.
 City State Zip Code
 Fayetteville AR 72701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 self Social Worker
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3124809
 Amount of Each Receipt this Period
 100.00

C. Ms. Roena Oesting
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 180844
 City State Zip Code
 Coronado CA 92178
 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 ▼
 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131972
 Amount of Each Receipt this Period
 75.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 200.00 |
| 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 545 OF 2452
(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 Denise Offutt
 Full Name (Last, First, Middle Initial)
 Mailing Address 2785 Pacific Coast Hwy., Ste. Suite E 267
 City Torrance State CA Zip Code 90505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Epson America, Inc. Market Researcher
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134528
 Amount of Each Receipt this Period
 125.00

B. Ms. Virginia Ogle
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 277
 City Mendenhall State PA Zip Code 19357
 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 ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129841
 Amount of Each Receipt this Period
 500.00

C. Mrs. Beth Ann Ann O'Hara
 Full Name (Last, First, Middle Initial)
 Mailing Address 206 County Rd.
 City Bedford State NH Zip Code 03110
 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 ▼
 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132445
 Amount of Each Receipt this Period
 25.00

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 546 OF 2452 |
| | <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. Marsha Oldakowski
Full Name (Last, First, Middle Initial)
Mailing Address 27 Tierra Adentro
City Santa Fe State NM Zip Code 87508
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 **360.00**

Date of Receipt **12 / 15 / 2011**
Transaction ID : 3129405
Amount of Each Receipt this Period **300.00**

B. Ms. Sylvia B Olivetti
Full Name (Last, First, Middle Initial)
Mailing Address 1917 Locust Grove Road
City Silver Spring State MD Zip Code 20910
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Not employed
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1400.00**

Date of Receipt **12 / 13 / 2011**
Transaction ID : 3126706
Amount of Each Receipt this Period **250.00**

c. Ms. Keran Olm-Stoelting
Full Name (Last, First, Middle Initial)
Mailing Address 321 Desoto Street
City Nokomis State FL Zip Code 34275
FEC ID number of contributing federal political committee. **C**
Name of Employer Venice United Church of Christ Occupation Ordained Minister
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt **12 / 18 / 2011**
Transaction ID : 3130906
Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **305.00**
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 547 OF 2452
(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. Dorothy Olson

Mailing Address 7500 North Calle Sin Envidla A
Apt. # 12208

City Tucson State AZ Zip Code 85718

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

Name of Employer Self Occupation Potter

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128923

Amount of Each Receipt this Period
 200.00

Full Name (Last, First, Middle Initial)
B. Dr. Laretta Omeltschenko

Mailing Address 2819 Harrison Avenue

City Cincinnati State OH Zip Code 45211

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

Name of Employer Transitions Inc. WRAP Occupation Clinical Director

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
 12 / 12 / 2011
Transaction ID : 3125402

Amount of Each Receipt this Period
 300.00

Full Name (Last, First, Middle Initial)
C. Dr. Cordelia Ontiveros

Mailing Address 1450 E. North Hills Dr.

City La Habra State CA Zip Code 90631

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

Name of Employer Cal State Univ Occupation Univ Admin

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
 12 / 23 / 2011
Transaction ID : 3135604

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 420.00

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 548 OF 2452
(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. Ursula Oppens
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 West 115th Street
 City New York State NY Zip Code 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Brooklyn College and the CUNY Graduate Occupation Professor
 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
 12 / 20 / 2011
Transaction ID : 3133152
 Amount of Each Receipt this Period
 100.00

B. Mr. Robert J. Oremus
 Full Name (Last, First, Middle Initial)
 Mailing Address 965 Rogers Street Unit 401
 City Downers Grove State IL Zip Code 60515
 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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131111
 Amount of Each Receipt this Period
 100.00

C. Ms. Margaret T Orr
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 Minturn Street
 City Hastings On Hudson State NY Zip Code 10706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bank Street College Occupation faculty
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3121764
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
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 549 OF 2452 |
| | <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. Margaret T Orr
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 Minturn Street
 City State Zip Code
 Hastings On Hudson NY 10706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Bank Street College faculty
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130528
 Amount of Each Receipt this Period
 500.00

B. Ms. Margaret T Orr
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 Minturn Street
 City State Zip Code
 Hastings On Hudson NY 10706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Bank Street College faculty
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : 3135296
 Amount of Each Receipt this Period
 500.00

C. Dr. Kelly Orringer
 Full Name (Last, First, Middle Initial)
 Mailing Address 2321 Tall Oaks Dr
 City State Zip Code
 Ann Arbor MI 48103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 U Michigan Health System Physician
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129158
 Amount of Each Receipt this Period
 20.00

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| SUBTOTAL of Receipts This Page (optional).....▶ | 1020.00 |
| 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 550 OF 2452 |
| | <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. Miriam W. Orzech | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2011 |
| Mailing Address 1624 NW Crest Pl | | | Transaction ID : 3133452 |
| City Corvallis | State OR | Zip Code 97330 | Amount of Each Receipt this Period 150.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer REQUESTED | Occupation retired professor | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 403.13 | | |

| | | | |
|---|------------------------------------|-------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Eunice Osban | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 25 / 2011 |
| Mailing Address 133 Shoreline Drive | | | Transaction ID : 3135612 |
| City Gulf Breeze | State FL | Zip Code 32561 | Amount of Each Receipt this Period 20.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer n/a | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 230.00 | | |

| | | | |
|---|------------------------------------|-------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Rosemary M Oster | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2011 |
| Mailing Address 4977 Battery Ln | | | Transaction ID : 3135370 |
| City Bethesda | State MD | Zip Code 20814 | Amount of Each Receipt this Period 50.00 |
| 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 ▼ 248.00 | | |

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 220.00 |
| 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 551 OF 2452 |
| | (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

Full Name (Last, First, Middle Initial)
A. Ms. Mary K Ostrander

Mailing Address 61725 Ward Rd

City Bend State OR Zip Code 97702

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 ▼ **245.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3128546

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Mrs. Judith F. Ostrow

Mailing Address 3604 NW 60th St.

City Seattle State WA Zip Code 98107

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 ▼ **850.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2011

Transaction ID : 3135353

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Dr. Valerie Ostrowers

Mailing Address 101 Bristol Grn.

City San Antonio State TX Zip Code 78209

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

Name of Employer Self Occupation MD

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
 12 / 19 / 2011

Transaction ID : 3131848

Amount of Each Receipt this Period
125.00

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 552 OF 2452 |
| | <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. Ernesto R. Otero
Full Name (Last, First, Middle Initial)
Mailing Address 3839 Sebren Ave.
City Long Beach State CA Zip Code 90808
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 **2500.00**

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123377
Amount of Each Receipt this Period
250.00

B. Ms. Marlene Ott
Full Name (Last, First, Middle Initial)
Mailing Address 5921 Sugarbush Ln.
City Greendale State WI Zip Code 53129
FEC ID number of contributing federal political committee. **C**
Name of Employer South Milwaukee Board of Education Occupation Teacher
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **525.00**

Date of Receipt
12 / 19 / 2011
Transaction ID : 3131951
Amount of Each Receipt this Period
150.00

C. Ms. Alexandra H. Ottaway
Full Name (Last, First, Middle Initial)
Mailing Address 203 Maple Ridge Road
City Florence State MA Zip Code 01062
FEC ID number of contributing federal political committee. **C**
Name of Employer Zotta Songs(ASCAP) Occupation musician
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **245.00**

Date of Receipt
12 / 03 / 2011
Transaction ID : 3119793
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... **420.00**
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 553 OF 2452 |
| | <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. Shawn Otto
Full Name (Last, First, Middle Initial)
Mailing Address 12697 177th Street N
City Marine St Crx State MN Zip Code 55047
FEC ID number of contributing federal political committee. **C**
Name of Employer Values Occupation Screen Writer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 15 / 2011
Transaction ID : 3129422
Amount of Each Receipt this Period
20.00

B. Mr. Layne Owens
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 42
City Rehoboth Beach State DE Zip Code 19971
FEC ID number of contributing federal political committee. **C**
Name of Employer Values Occupation Stamp Development Sp
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 21 / 2011
Transaction ID : 3133695
Amount of Each Receipt this Period
115.00

C. Ms. Ann M. Packard
Full Name (Last, First, Middle Initial)
Mailing Address 532 East 87th Street
City New York State NY Zip Code 10128
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation self physician
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
12 / 31 / 2011
Transaction ID : 3139062
Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 554 OF 2452 |
| | <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. Ms. Linda S. Paine | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2011 |
| Mailing Address 2135 Watts Street | | Transaction ID : 3126998 |
| City Houston | State TX | Zip Code 77030 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 125.00 |
| 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 ▼ 225.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Sally Painter | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2011 |
| Mailing Address 6522 Western Avenue | | Transaction ID : 3123442 |
| City Chevy Chase | State MD | Zip Code 20815 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer DMG Group | Occupation Consultant | |
| 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. Jane Pak | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 7107 Churchill Way | | Transaction ID : 3129842 |
| City Dallas | State TX | Zip Code 75230 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 275.00 |
| 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 ▼ 575.00 | |

| | |
|--|--------|
| 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 555 OF 2452 |
| | <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. John Palka | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2011 Transaction ID : 3120867 |
| Mailing Address P. O. Box 135 | | Amount of Each Receipt this Period 350.00 |
| City Langley | State WA | Zip Code 98260 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 350.00 |
| Name of Employer University of Washington | Occupation Professor - retired | |
| 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) B. Suzanne Palminteri | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2011 Transaction ID : 3132949 |
| Mailing Address 1250 24th St., NW | | Amount of Each Receipt this Period 75.00 |
| City Washington | State DC | Zip Code 20037 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 75.00 |
| Name of Employer self | Occupation consultant | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 295.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mrs. Martha Panetti | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 Transaction ID : 3134643 |
| Mailing Address 3061 Wintergreen Dr. | | Amount of Each Receipt this Period 75.00 |
| City Florissant | State MO | Zip Code 63033 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 75.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 185.00 |
| 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 556 OF 2452 |
| | <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. Gustav F Papanek
Full Name (Last, First, Middle Initial)

Mailing Address 2 Mason St

City Lexington State MA Zip Code 02421

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

Name of Employer BIDE Occupation Economist

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
 12 / 31 / 2011

Transaction ID : 3139069

Amount of Each Receipt this Period
 50.00

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

Mailing Address 192 Willard Street

City New Haven State CT Zip Code 06511

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

Name of Employer yale Occupation Manager

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
 12 / 20 / 2011

Transaction ID : 3133195

Amount of Each Receipt this Period
 25.00

C. Ms. Evelyn Parisot
Full Name (Last, First, Middle Initial)

Mailing Address 3555 8th Street

City Moline State IL Zip Code 61265

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 ▼ 3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 10 / 2011

Transaction ID : 3125966

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00

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 557 OF 2452 |
| | <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. Ethel E. Parker
Full Name (Last, First, Middle Initial)
Mailing Address 48 Parker Rd.
City Fort Shaw State MT Zip Code 59443
FEC ID number of contributing federal political committee. **C**
Name of Employer PARKER FARMS Occupation retired farmer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **326.25**

Date of Receipt **12 / 16 / 2011**
Transaction ID : 3131468
Amount of Each Receipt this Period **35.00**

B. Dr. Joanne E. Parker
Full Name (Last, First, Middle Initial)
Mailing Address 3510 Turtle Creek Blvd. 14A # 4A
City Dallas State TX Zip Code 75219
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation clinical psychologis
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1125.00**

Date of Receipt **12 / 22 / 2011**
Transaction ID : 3134009
Amount of Each Receipt this Period **1000.00**

C. Ms. Cindy Parks
Full Name (Last, First, Middle Initial)
Mailing Address 5896 Arroyo Vista NE
City Rockford State MI Zip Code 49341
FEC ID number of contributing federal political committee. **C**
Name of Employer Logicalis Occupation Technical Consultant
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **450.00**

Date of Receipt **12 / 25 / 2011**
Transaction ID : 3135537
Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional)..... **1085.00**
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 558 OF 2452
(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 Parnell
 Full Name (Last, First, Middle Initial)
 Mailing Address 1005A Fell St.
 City San Francisco State CA Zip Code 94117
 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 ▼ 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129544
 Amount of Each Receipt this Period
 300.00

B. Gillian Parrillo
 Full Name (Last, First, Middle Initial)
 Mailing Address 3816 Bowser Ave Apt B
 City Dallas State TX Zip Code 75219
 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
 12 / 09 / 2011
Transaction ID : 3125085
 Amount of Each Receipt this Period
 1000.00

C. Ms. Celeste Parsons
 Full Name (Last, First, Middle Initial)
 Mailing Address 15085 Wolfe Bennett Rd.
 City Nelsonville State OH Zip Code 45764
 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 ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134506
 Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1155.00
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 559 OF 2452 |
| | <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 H Partee
Full Name (Last, First, Middle Initial)

Mailing Address 50 Hobart Ln

City Amherst State MA Zip Code 01002

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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3128496

Amount of Each Receipt this Period
 200.00

B. Rev. Ruth G Partlow
Full Name (Last, First, Middle Initial)

Mailing Address 3358 Medway Lane

City Powhatan State VA Zip Code 23139

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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3128815

Amount of Each Receipt this Period
 30.00

C. Dr. Nicholas Passell
Full Name (Last, First, Middle Initial)

Mailing Address 524 Lincoln Avenue

City Eau Claire State WI Zip Code 54701

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

Name of Employer University Wisconsin Occupation College Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 25 / 2011

Transaction ID : 3135643

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00

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 560 OF 2452
(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. Gary Passon
 Full Name (Last, First, Middle Initial)
 Mailing Address 1390 S. Kihei Rd
 City Kihei State HI Zip Code 96753
 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 ▼ 270.00

Date of Receipt
 12 / 08 / 2011
Transaction ID : 3124492
 Amount of Each Receipt this Period
 200.00

B. Mr. Gary Passon
 Full Name (Last, First, Middle Initial)
 Mailing Address 1390 S. Kihei Rd
 City Kihei State HI Zip Code 96753
 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 ▼ 270.00

Date of Receipt
 12 / 14 / 2011
Transaction ID : 3127787
 Amount of Each Receipt this Period
 50.00

C. Mr. Gary Passon
 Full Name (Last, First, Middle Initial)
 Mailing Address 1390 S. Kihei Rd
 City Kihei State HI Zip Code 96753
 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 ▼ 270.00

Date of Receipt
 12 / 17 / 2011
Transaction ID : 3130544
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
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 561 OF 2452 |
| | <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. Mehool Patel | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2011 |
| Mailing Address 327 Greensfield Avenue | | Transaction ID : 3134117 |
| City Copley | State OH | Zip Code 44321 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 1000.00 |
| Name of Employer SPI, Inc | Occupation PHYSICIAN | |
| 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. Dr. Mehool Patel | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2011 |
| Mailing Address 327 Greensfield Avenue | | Transaction ID : 3134118 |
| City Copley | State OH | Zip Code 44321 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 1000.00 |
| Name of Employer SPI, Inc | Occupation PHYSICIAN | |
| 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. Rebecca J. Patten | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2011 |
| Mailing Address 512 S Lahoma Ave. | | Transaction ID : 3119147 |
| City Norman | State OK | Zip Code 73069 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 200.00 |
| Name of Employer Self | Occupation Lawyer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2200.00 |
| 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 562 OF 2452 |
| | <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. Anne Patterson
Full Name (Last, First, Middle Initial)
Mailing Address 80 Buckingham St
City Cambridge State MA Zip Code 02138
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation Homemaker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **400.00**

Date of Receipt **12 / 16 / 2011**
Transaction ID : 3131451
Amount of Each Receipt this Period **100.00**

B. Mrs. Margaret Pattison
Full Name (Last, First, Middle Initial)
Mailing Address 410 S Brook Ln.
City Anaheim State CA Zip Code 92807
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 **370.00**

Date of Receipt **12 / 27 / 2011**
Transaction ID : 3134502
Amount of Each Receipt this Period **35.00**

C. Ms. Alyx S. Pattison
Full Name (Last, First, Middle Initial)
Mailing Address 1111 N. Western Ave.
City Chicago State IL Zip Code 60622
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 **12 / 01 / 2011**
Transaction ID : 3119307
Amount of Each Receipt this Period **500.00**

SUBTOTAL of Receipts This Page (optional)..... **635.00**
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 563 OF 2452 |
| | <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. Kala Paul
Full Name (Last, First, Middle Initial)
Mailing Address 24 Sweetbriar Road

| | | |
|----------------|-------------|-------------------|
| City Summit | State NJ | Zip Code 07901 |
|----------------|-------------|-------------------|

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 ▼
360.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129012

Amount of Each Receipt this Period
300.00

B. Mr. Richard J. Paur
Full Name (Last, First, Middle Initial)
Mailing Address 5313 Tuliptree Lane

| | | |
|-----------------|-------------|-------------------|
| City Raleigh | State NC | Zip Code 27612 |
|-----------------|-------------|-------------------|

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

| | |
|-----------------------------------|-----------------------|
| Name of Employer Self employed | Occupation Chemist |
|-----------------------------------|-----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 05 | / | 2011 |

Transaction ID : 3121216

Amount of Each Receipt this Period
10.00

C. Ms. Jone Pearce
Full Name (Last, First, Middle Initial)
Mailing Address 6 Curie Ct.

| | | |
|----------------|-------------|-------------------|
| City Irvine | State CA | Zip Code 92617 |
|----------------|-------------|-------------------|

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

| | |
|---|-------------------------|
| Name of Employer University of Calif | Occupation Professor |
|---|-------------------------|

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 |
| 12 | / | 21 | / | 2011 |

Transaction ID : 3133587

Amount of Each Receipt this Period
300.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 340.00 |
| 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 564 OF 2452 |
| | <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. Laurence D Pearl | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2011 |
| Mailing Address 905 East Capitol Street SE | | Transaction ID : 3139106 |
| City Washington | State DC | Zip Code 20003 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer n/a | Occupation Retired | |
| 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) B. Ms. Pamela M Pearson | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 116 Edgewater Park Street | | Transaction ID : 3129566 |
| City Davidson | State NC | Zip Code 28036 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 |
| Name of Employer Wells Fargo | Occupation Attorney | |
| 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. Ms. Maria Pedak-Kari | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address 24129 Newbury Rd. | | Transaction ID : 3134380 |
| City Gaithersburg | State MD | Zip Code 20882 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 125.00 |
| Name of Employer Montgomery College | Occupation professor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 275.00 |
| 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 565 OF 2452 |
| | <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. Marsha Pedersen
Full Name (Last, First, Middle Initial)
Mailing Address 5250 W Avenue L6
City Lancaster State CA Zip Code 93536
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 ▼ 575.00

Date of Receipt 12 / 16 / 2011
Transaction ID : 3131529
Amount of Each Receipt this Period 100.00

B. Shauna Peet
Full Name (Last, First, Middle Initial)
Mailing Address 1960 N. Seminary Avenue
City Chicago State IL Zip Code 60614
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 ▼ 225.00

Date of Receipt 12 / 26 / 2011
Transaction ID : 3135869
Amount of Each Receipt this Period 10.00

C. Ms. Pamela D. Pelletreau
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 183 Apt. 16A/B
City Woods Hole State MA Zip Code 02543
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 ▼ 345.00

Date of Receipt 12 / 24 / 2011
Transaction ID : 3135630
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00
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 566 OF 2452
(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. Donald C Pelz

Mailing Address 3470 Carpenter Rd Apt 211

City State Zip Code
Ypsilanti MI 48197

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 ▼
1160.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : 3128647

Amount of Each Receipt this Period
80.00

Full Name (Last, First, Middle Initial)
B. Ms. Jacqueline Pelzer

Mailing Address 540 East 76th Street

City State Zip Code
NEW YORK NY 10021

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

Name of Employer Occupation
Early Steps Educator

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
12 / 02 / 2011

Transaction ID : 3119997

Amount of Each Receipt this Period
40.00

Full Name (Last, First, Middle Initial)
C. Ms. Elisabeth Pendleton

Mailing Address 3410 Lowell Street NW

City State Zip Code
Washington DC 20016

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 ▼
444.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : 3129362

Amount of Each Receipt this Period
37.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 157.00

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 567 OF 2452 |
| | <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. Sally Pennington
Full Name (Last, First, Middle Initial)
Mailing Address 1759 Friendship Road
City Waldoboro State ME Zip Code 04572
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 **268.00**

Date of Receipt **12 / 04 / 2011**
Transaction ID : 3119892
Amount of Each Receipt this Period **20.00**

B. Ms. Diane Percival
Full Name (Last, First, Middle Initial)
Mailing Address 4554 N Paulina St Apt 5
City Chicago State IL Zip Code 60640
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 **205.00**

Date of Receipt **12 / 19 / 2011**
Transaction ID : 3132439
Amount of Each Receipt this Period **10.00**

C. Dr. Gordon Perkin
Full Name (Last, First, Middle Initial)
Mailing Address 302 Lakeside Ave S # 103 Apartment #103
City Seattle State WA Zip Code 98144
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 **355.00**

Date of Receipt **12 / 01 / 2011**
Transaction ID : 3119309
Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **55.00**
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 568 OF 2452 |
| | <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. Gordon Perkin
Full Name (Last, First, Middle Initial)

Mailing Address 302 Lakeside Ave S # 103
Apartment #103

City Seattle State WA Zip Code 98144

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 ▼
355.00

Date of Receipt
12 / 20 / 2011
Transaction ID : 3132963

Amount of Each Receipt this Period
100.00

B. Ms. Victoria J Perkins
Full Name (Last, First, Middle Initial)

Mailing Address 11000 Huntover Dr.

City Rockville State MD Zip Code 20852

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

Name of Employer B. B. Saul Company Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
12 / 21 / 2011
Transaction ID : 3133616

Amount of Each Receipt this Period
1000.00

C. Mrs. Prudence A. Perry
Full Name (Last, First, Middle Initial)

Mailing Address 370 E. Baldwin Lane

City Shelton State WA Zip Code 98584

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 ▼
245.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129331

Amount of Each Receipt this Period
25.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1125.00 |
| 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 569 OF 2452 |
| | <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. Deborah Perry
Full Name (Last, First, Middle Initial)
Mailing Address 1140 South Plymouth Court

| | | |
|-----------------|-------------|-------------------|
| City Chicago | State IL | Zip Code 60605 |
|-----------------|-------------|-------------------|

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

| | |
|---|--------------------------|
| Name of Employer Selinda Research Associates | Occupation Consultant |
|---|--------------------------|

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 |
| 12 | / | 22 | / | 2011 |

Transaction ID : 3134250

Amount of Each Receipt this Period
150.00

B. Mr. Reuben Person
Full Name (Last, First, Middle Initial)
Mailing Address 1260 Moorlands Dr

| | | |
|----------------|-------------|-------------------|
| City Tacoma | State WA | Zip Code 98405 |
|----------------|-------------|-------------------|

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 ▼
1104.12

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 13 | / | 2011 |

Transaction ID : 3126287

Amount of Each Receipt this Period
590.00

C. Mrs. Karen K Peter
Full Name (Last, First, Middle Initial)
Mailing Address 1627 East H Street

| | | |
|---------------------|-------------|-------------------|
| City Chula Vista | State CA | Zip Code 91913 |
|---------------------|-------------|-------------------|

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 ▼
225.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 14 | / | 2011 |

Transaction ID : 3128100

Amount of Each Receipt this Period
50.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 790.00 |
| 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 570 OF 2452 |
| | <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. Marian Peters
Full Name (Last, First, Middle Initial)

Mailing Address 9048 Shawn Park Place

City Orlando State FL Zip Code 32819

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

Name of Employer Grimmy, Inc Occupation President

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
 12 / 20 / 2011

Transaction ID : 3132964

Amount of Each Receipt this Period
100.00

B. Ms. Lyn J Peters
Full Name (Last, First, Middle Initial)

Mailing Address 962 Farm Haven Drive

City Rockville State MD Zip Code 20852

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

Name of Employer retired Occupation administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3133949

Amount of Each Receipt this Period
100.00

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

Mailing Address 980 Bridge View Ct.

City Astoria State OR Zip Code 97103

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 ▼ **638.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011

Transaction ID : 3119456

Amount of Each Receipt this Period
38.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **238.00**

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 571 OF 2452
(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 Petersen
 Full Name (Last, First, Middle Initial)
 Mailing Address 980 Bridge View Ct.
 City Astoria State OR Zip Code 97103
 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 ▼ 638.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3137689
 Amount of Each Receipt this Period
 100.00

B. Ms. Laura K. Petersen
 Full Name (Last, First, Middle Initial)
 Mailing Address 418 E 59th St., Apt. 36B
 City New York State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Accenture Occupation Consultant
 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
 12 / 22 / 2011
Transaction ID : 3134113
 Amount of Each Receipt this Period
 1000.00

C. Ms. Kathleen Peterson
 Full Name (Last, First, Middle Initial)
 Mailing Address 985 Romero Canyon Rd
 City Santa Barbara State CA Zip Code 93108
 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
 12 / 06 / 2011
Transaction ID : 3121829
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
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 572 OF 2452 |
| | (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. Donna Petkanics
Full Name (Last, First, Middle Initial)
Mailing Address 75 N. Gordon Way

| | | |
|-------------------|-------------|-------------------|
| City Los Altos | State CA | Zip Code 94022 |
|-------------------|-------------|-------------------|

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

| | |
|--|------------------------|
| Name of Employer Wilson Goodnich Rosati | Occupation Attorney |
|--|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
212.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 13 | / | 2011 |

Transaction ID : 3126276

Amount of Each Receipt this Period
212.00

B. Mrs. Nancy E. Pettengill
Full Name (Last, First, Middle Initial)
Mailing Address 1300 Sanderling Island

| | | |
|------------------------|-------------|-------------------|
| City Point Richmond | State CA | Zip Code 94801 |
|------------------------|-------------|-------------------|

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

| | |
|-------------------------|-------------------------------------|
| Name of Employer IDC | Occupation Technology Specialist |
|-------------------------|-------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129383

Amount of Each Receipt this Period
32.50

C. Mr. Kenneth D Phelps
Full Name (Last, First, Middle Initial)
Mailing Address 18222 Crystal Cv.

| | | |
|---------------------|-------------|-------------------|
| City San Antonio | State TX | Zip Code 78259 |
|---------------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3134576

Amount of Each Receipt this Period
125.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 369.50 |
| TOTAL This Period (last page this line 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 573 OF 2452
(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. Mary M. Phillips

Mailing Address 1837 Albion Street

City State Zip Code
Denver CO 80220

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 ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128041

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Ms. Adrienne Phillips

Mailing Address 12 Vista Paseador

City State Zip Code
Placitas NM 87043

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 ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128640

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
C. Mr. Harry L Phillips Jr.

Mailing Address 10330 NE 137th Pl.

City State Zip Code
Kirkland WA 98034

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 ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011
Transaction ID : 3133669

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00

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 574 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. 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 na Occupation home maker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : 3134063
 Amount of Each Receipt this Period
 315.00

B. Ms. Sharon R Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 8030 SW 62nd Pl.
 City Portland State OR Zip Code 97219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation Retired Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134560
 Amount of Each Receipt this Period
 300.00

C. Ms. Janice Pickard
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 1675
 City Coupeville State WA Zip Code 98239
 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
 12 / 15 / 2011
Transaction ID : 3128557
 Amount of Each Receipt this Period
 50.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 665.00 |
| 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 575 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Judith Pickering
Full Name (Last, First, Middle Initial)
Mailing Address 16 Ledgewood Hills Dr Apt. 30

| | | |
|----------------|-------------|-------------------|
| City Nashua | State NH | Zip Code 03062 |
|----------------|-------------|-------------------|

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 ▼
210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 26 / 2011
Transaction ID : 3135876

Amount of Each Receipt this Period
35.00

B. Mrs. Helen D. D Pickering
Full Name (Last, First, Middle Initial)
Mailing Address 3931 Grove Ave.

| | | |
|-------------------|-------------|-------------------|
| City Palo Alto | State CA | Zip Code 94303 |
|-------------------|-------------|-------------------|

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

| | |
|--------------------------|-------------------------|
| Name of Employer self | Occupation Homemaker |
|--------------------------|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133161

Amount of Each Receipt this Period
75.00

C. Ms. Susan Piepho
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1089

| | | |
|---------------------|-------------|-------------------|
| City Sweet Briar | State VA | Zip Code 24595 |
|---------------------|-------------|-------------------|

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
 12 / 28 / 2011
Transaction ID : 3135117

Amount of Each Receipt this Period
250.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 360.00 |
| 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 576 OF 2452 |
| | <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. Aileen Pierce | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 5609 Hammock Isles | | Transaction ID : 3128077 |
| City Naples | State FL | Zip Code 34119 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100.00 | |
| Name of Employer n/a | Occupation retired | |
| 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. Gaye T. Pigott | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 1500 42nd Ave E | | Transaction ID : 3129808 |
| City Seattle | State WA | Zip Code 98112 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 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 ▼ 1000.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Mr. ARTHUR L L. Pike | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2011 |
| Mailing Address 34 Bradford St. | | Transaction ID : 3136882 |
| City Provincetown | State MA | Zip Code 02657 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 10.00 | |
| Name of Employer Tufts University | Occupation Retired Professor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 220.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1110.00 |
| 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 577 OF 2452 |
| | <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. Edward D. Pillar
Full Name (Last, First, Middle Initial)

Mailing Address 668 Rochdale Cir.

| | | |
|-----------------|-------------|-------------------|
| City Lombard | State IL | Zip Code 60148 |
|-----------------|-------------|-------------------|

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 ▼
205.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 19 | / | 2011 |

Transaction ID : 3131886

Amount of Each Receipt this Period
50.00

B. Ms. Ellen Pillard
Full Name (Last, First, Middle Initial)

Mailing Address 541 Sunnyside Dr.

| | | |
|--------------|-------------|-------------------|
| City Reno | State NV | Zip Code 89503 |
|--------------|-------------|-------------------|

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 ▼
220.12

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 06 | / | 2011 |

Transaction ID : 3121685

Amount of Each Receipt this Period
220.12

C. Ms. Laura M. Pippenger
Full Name (Last, First, Middle Initial)

Mailing Address 315 N. Senate Avenue # C

| | | |
|----------------------|-------------|-------------------|
| City Indianapolis | State IN | Zip Code 46204 |
|----------------------|-------------|-------------------|

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

| | |
|---|--------------------------------|
| Name of Employer University of Chicago | Occupation public relations |
|---|--------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129511

Amount of Each Receipt this Period
20.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 290.12 |
| 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 578 OF 2452 |
| | <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. Martha Pisano | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 25 / 2011 Transaction ID : 3135650 |
| Mailing Address 151 Doe Run Station Road | | Amount of Each Receipt this Period 30.00 |
| City Coatesville | State PA | Zip Code 19320 |
| FEC ID number of contributing federal political committee. C | Aggregate Year-to-Date ▼ 240.00 | |
| Name of Employer Self-Employed | Occupation Self-Employed | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Gavine N Pitner | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 14 / 2011 Transaction ID : 3127805 |
| Mailing Address 630 Wiley Ave | | Amount of Each Receipt this Period 250.00 |
| City Salisbury | State NC | Zip Code 28144 |
| FEC ID number of contributing federal political committee. C | Aggregate Year-to-Date ▼ 500.00 | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mr. Robert Pitsch | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 01 / 2011 Transaction ID : 3119395 |
| Mailing Address 908 Cedar Drive | | Amount of Each Receipt this Period 10.00 |
| City Kill Devil HI | State NC | Zip Code 27948 |
| FEC ID number of contributing federal political committee. C | Aggregate Year-to-Date ▼ 260.00 | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 290.00 |
| 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 579 OF 2452 |
| | <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. Peggy Goldberg Pitt
Full Name (Last, First, Middle Initial)
Mailing Address 8019 Concord Rd.
City Huntington Woods State MI Zip Code 48070
FEC ID number of contributing federal political committee. **C**
Name of Employer Pitt, Douty & McGebee Occupation Attorney
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
12 / 19 / 2011
Transaction ID : 3131836
Amount of Each Receipt this Period
1000.00

B. Mrs. Sandy Piwoz
Full Name (Last, First, Middle Initial)
Mailing Address 5 Tenakill Park E Apt. 304 Apt. 304
City Cresskill State NJ Zip Code 07626
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 ▼ 386.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2011
Transaction ID : 3139115
Amount of Each Receipt this Period
25.00

C. Gunnar Plake
Full Name (Last, First, Middle Initial)
Mailing Address 427 San Antonio St
City Santa Fe State NM Zip Code 87505
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation real estate, photogr
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
12 / 18 / 2011
Transaction ID : 3130565
Amount of Each Receipt this Period
20.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1045.00 |
| 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 580 OF 2452
(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. Morgan P. Plant
 Full Name (Last, First, Middle Initial)
 Mailing Address 322 S West St
 City Carlisle State PA Zip Code 17013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Lobbyist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3124717
 Amount of Each Receipt this Period
 20.00

B. Mrs. Barbara A Plum
 Full Name (Last, First, Middle Initial)
 Mailing Address 1504 Melba Court
 City Mountain View State CA Zip Code 94040
 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 ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2011
Transaction ID : 3135837
 Amount of Each Receipt this Period
 20.00

C. Ms. Nancy S Pluto
 Full Name (Last, First, Middle Initial)
 Mailing Address 2131 Royal Pines Dr.
 City New Bern State NC Zip Code 28560
 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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011
Transaction ID : 3133606
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 581 OF 2452 |
| | <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. John P. Poertner
Full Name (Last, First, Middle Initial)

Mailing Address 1646 Hillcrest Rd

City Lawrence State KS Zip Code 66044

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 ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011

Transaction ID : 3124720

Amount of Each Receipt this Period
250.00

B. Ms. Teresa A. Poirier
Full Name (Last, First, Middle Initial)

Mailing Address 1709 Silverwood Drive

City Martinez State CA Zip Code 94553

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

Name of Employer John Muir Medical Center Occupation RN

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
 12 / 15 / 2011

Transaction ID : 3129037

Amount of Each Receipt this Period
50.00

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

Mailing Address Po Box 1150

City Woodstock State NY Zip Code 12498

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 ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011

Transaction ID : 3124966

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **330.00**

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 582 OF 2452 |
| | <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. Arlene H. Pollack
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Ebersbach Lane
 City Roseland State NJ Zip Code 07068
 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 ▼ 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 05 / 2011
Transaction ID : 3121199
 Amount of Each Receipt this Period
 200.00

B. Mr. J. Sheppard Poor
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Azalea Ln.
 City Rumson State NJ Zip Code 07760
 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 ▼ 940.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132040
 Amount of Each Receipt this Period
 115.00

C. Mr. Joe Pope
 Full Name (Last, First, Middle Initial)
 Mailing Address 17 E. Kelley Road
 City Newbury Park State CA Zip Code 91320
 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 ▼ 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2011
Transaction ID : 3131160
 Amount of Each Receipt this Period
 30.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 345.00 |
| 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 583 OF 2452 |
| | <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. Terry Poplawski
Full Name (Last, First, Middle Initial)
Mailing Address 4726 San Feliciano Dr.
City Woodland Hills State CA Zip Code 91364
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 **240.00**

Date of Receipt **12 / 23 / 2011**
Transaction ID : 3135656
Amount of Each Receipt this Period **200.00**

B. Ms. Elizabeth S. Poppendiek
Full Name (Last, First, Middle Initial)
Mailing Address 7834 Esterel Dr.
City La Jolla State CA Zip Code 92037
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 **800.00**

Date of Receipt **12 / 19 / 2011**
Transaction ID : 3131834
Amount of Each Receipt this Period **200.00**

C. Dr. Lynne I Portnoy
Full Name (Last, First, Middle Initial)
Mailing Address 600 Aredo De Carlos
City Farmington State NM Zip Code 87401
FEC ID number of contributing federal political committee. **C**
Name of Employer Basin Occ and Urgent Care Occupation physician
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **400.00**

Date of Receipt **12 / 06 / 2011**
Transaction ID : 3122985
Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional)..... **270.00**
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 584 OF 2452 |
| | <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. Lynne I Portnoy
Full Name (Last, First, Middle Initial)
Mailing Address 600 Aredo De Carlos
City Farmington State NM Zip Code 87401
FEC ID number of contributing federal political committee. **C**
Name of Employer Basin Occ and Urgent Care Occupation physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
12 / 30 / 2011
Transaction ID : 3135352
Amount of Each Receipt this Period 50.00

B. Ms. Maritha Pottenger
Full Name (Last, First, Middle Initial)
Mailing Address 3808 49th St.
City San Diego State CA Zip Code 92105
FEC ID number of contributing federal political committee. **C**
Name of Employer Astro Communications Occupation Editor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt
12 / 29 / 2011
Transaction ID : 3135242
Amount of Each Receipt this Period 40.00

C. Ms. Frances Potter
Full Name (Last, First, Middle Initial)
Mailing Address 38 Little Pond Rd
City Concord State NH Zip Code 03301
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 ▼ 220.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3128820
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
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 585 OF 2452 |
| | <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 Potter
Full Name (Last, First, Middle Initial)
Mailing Address 38 Little Pond Rd
City Concord State NH Zip Code 03301
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 **220.00**

Date of Receipt **12 / 27 / 2011**
Transaction ID : 3134361
Amount of Each Receipt this Period **100.00**

B. Ms. Susan E E. Potter
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 376
City Jamestown State RI Zip Code 02835
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 **360.00**

Date of Receipt **12 / 15 / 2011**
Transaction ID : 3128949
Amount of Each Receipt this Period **30.00**

C. Mr. Howard C. Poulter
Full Name (Last, First, Middle Initial)
Mailing Address 4375 Bridgeview Drive
City Oakland State CA Zip Code 94602
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 **2513.00**

Date of Receipt **12 / 19 / 2011**
Transaction ID : 3132531
Amount of Each Receipt this Period **2513.00**
[MEMO ITEM]
Stk-100 Shs Hewlett Packard

SUBTOTAL of Receipts This Page (optional)..... **130.00**
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 586 OF 2452 |
| | <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. M J. Powell
Full Name (Last, First, Middle Initial)
Mailing Address 31 Cheever Cir.
City Andover State MA Zip Code 01810
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 **1750.00**

Date of Receipt **12 / 19 / 2011**
Transaction ID : 3131835
Amount of Each Receipt this Period **1000.00**

B. Carolyn Powell
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 7480
City Boulder State CO Zip Code 80306
FEC ID number of contributing federal political committee. **C**
Name of Employer MVG Development Occupation Attorney
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **645.00**

Date of Receipt **12 / 15 / 2011**
Transaction ID : 3129603
Amount of Each Receipt this Period **60.00**

C. Ann Powley
Full Name (Last, First, Middle Initial)
Mailing Address 5008 Rainbows End
City Culver City State CA Zip Code 90230
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation Gemologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt **12 / 28 / 2011**
Transaction ID : 3137700
Amount of Each Receipt this Period **30.00**

SUBTOTAL of Receipts This Page (optional)..... **1090.00**
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 587 OF 2452 |
| | (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. Margaret M. Poyatt
Full Name (Last, First, Middle Initial)
Mailing Address 651 vanderbilt street, 7L
City Brooklyn State NY Zip Code 11218
FEC ID number of contributing federal political committee. **C**
Name of Employer CUNY (former employer) Occupation retired teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt
12 / 13 / 2011
Transaction ID : 3126720
Amount of Each Receipt this Period
35.00

B. Ms. Sandra Pradt
Full Name (Last, First, Middle Initial)
Mailing Address 3 N. Hill Road
City Wausau State WI Zip Code 54403
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 ▼ 225.00

Date of Receipt
12 / 06 / 2011
Transaction ID : 3122095
Amount of Each Receipt this Period
100.00

C. Ms. Mary Pratt
Full Name (Last, First, Middle Initial)
Mailing Address 23442 El Toro Rd., Apt. E221
City Lake Forest State CA Zip Code 92630
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 ▼ 681.00

Date of Receipt
12 / 16 / 2011
Transaction ID : 3131433
Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional).....▶ 260.00
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 588 OF 2452 |
| | <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. Philip Preston
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 573

City Ashland State NH Zip Code 03217

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 ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3128517

Amount of Each Receipt this Period
200.00

B. Ms. Charlotte A Price
Full Name (Last, First, Middle Initial)

Mailing Address 36 Matthew Dr

City Brunswick State ME Zip Code 04011

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 ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3132375

Amount of Each Receipt this Period
25.00

C. Ms. Leslie R. Price
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 109

City Worton State MD Zip Code 21678

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 ▼ **2500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011

Transaction ID : 3125412

Amount of Each Receipt this Period
2500.00

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2545.00 |
| 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 589 OF 2452 |
| | <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. wyndham price
Full Name (Last, First, Middle Initial)
Mailing Address 2016 junaluska cir.
City richmond State VA Zip Code 23225
FEC ID number of contributing federal political committee. **C**
Name of Employer City odF Richmond Parks Occupation maint. tech.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt
12 / 01 / 2011
Transaction ID : 3119310
Amount of Each Receipt this Period
125.00

B. wyndham price
Full Name (Last, First, Middle Initial)
Mailing Address 2016 junaluska cir.
City richmond State VA Zip Code 23225
FEC ID number of contributing federal political committee. **C**
Name of Employer City odF Richmond Parks Occupation maint. tech.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt
12 / 14 / 2011
Transaction ID : 3127813
Amount of Each Receipt this Period
80.00

C. Ms. Arleen Priest
Full Name (Last, First, Middle Initial)
Mailing Address 100 Riverside Dr # 3A
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 ▼ 250.00

Date of Receipt
12 / 27 / 2011
Transaction ID : 3134916
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.00
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 590 OF 2452 |
| | <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. Ms. Alicia Proffitt | | Date of Receipt |
| Mailing Address PO Box 2423 | | <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Brighton | MI | 48116 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3127814 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="100.00"/> |
| Name of Employer | Occupation | |
| None | Student | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="325.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Julia M. Quagliata | | Date of Receipt |
| Mailing Address Po Box 2783 | | <input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| East Setauket | NY | 11733 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3123383 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="325.00"/> |
| 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="450.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Renee Rabb | | Date of Receipt |
| Mailing Address PO Box 151297 | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Austin | TX | 78715 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3129622 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="20.00"/> |
| 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="240.00"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="445.00"/> |
| 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 591 OF 2452 |
| | <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. Pat Rabby
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Landsdowne Street
 Apt. 1605
 City Cambridge State MA Zip Code 02139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer free lance Occupation poet/photographer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : 3134245
 Amount of Each Receipt this Period
 150.00

B. Ms. Maureen Raftery
 Full Name (Last, First, Middle Initial)
 Mailing Address 151 Shelter Rock Road, Unit 73
 City Danbury State CT Zip Code 06810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sealed Air Corp Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : 3123695
 Amount of Each Receipt this Period
 15.00

C. Myra Ragan
 Full Name (Last, First, Middle Initial)
 Mailing Address 4709 N Dittmar Rd
 City Arlington State VA Zip Code 22207
 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 ▼ 262.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3121895
 Amount of Each Receipt this Period
 150.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 315.00 |
| 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 592 OF 2452 |
| | <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. Beverly Railsback | | Date of Receipt |
| Mailing Address 103 N. Franklin Street | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City State Zip Code Lambertville NJ 08530 | | Transaction ID : 3128927 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer Occupation n/a Retired | | <input type="text" value="360.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="360.00"/> |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Ms. Maryann Rainey | | Date of Receipt |
| Mailing Address 1318 4th Ave | | <input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2011"/> |
| City State Zip Code San Francisco CA 94122 | | Transaction ID : 3119646 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer Occupation REQUESTED REQUESTED | | <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) C. Ms. Patricia Rainwater | | Date of Receipt |
| Mailing Address 1404 Ruidosa Dr. | | <input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2011"/> |
| City State Zip Code Wichita Falls TX 76306 | | Transaction ID : 3135246 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer Occupation n/a Retired | | <input type="text" value="45.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="347.50"/> |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="575.00"/> |
| 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 593 OF 2452 |
| | <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. Virginia Ralston | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2011 |
| Mailing Address 177 N. Highland, #4502 | | Transaction ID : 3130850 |
| City Memphis | State TN | Zip Code 38111 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 1000.00 | |
| Name of Employer n/a | Occupation Retired | |
| 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) B. Ms. Virginia Ralston | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2011 |
| Mailing Address 177 N. Highland, #4502 | | Transaction ID : 3138587 |
| City Memphis | State TN | Zip Code 38111 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 1000.00 | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 5000.00 | Tr \$100 to NF 1/11/12 |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Ms. Loretta J. Rambert | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2011 |
| Mailing Address 5460 W Montgomery Ave | | Transaction ID : 3135317 |
| City Philadelphia | State PA | Zip Code 19131 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100.00 | |
| 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 ▼ 250.00 | |

| | |
|--|---------|
| 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 594 OF 2452 |
| | <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. Avis Rambo
Full Name (Last, First, Middle Initial)
Mailing Address 706 S. Gray St
City Stillwater State OK Zip Code 74074
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
12 / 16 / 2011
Transaction ID : 3131064
Amount of Each Receipt this Period
500.00

B. Jesse Ramirez
Full Name (Last, First, Middle Initial)
Mailing Address 3516 E. 8th St.
City Los Angeles State CA Zip Code 90023
FEC ID number of contributing federal political committee. **C**
Name of Employer Dept. of Consumer Affairs Occupation Consumer Advisor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt
12 / 09 / 2011
Transaction ID : 3126085
Amount of Each Receipt this Period
125.00

C. Ms. Barbara Ann Rampt
Full Name (Last, First, Middle Initial)
Mailing Address 3003 Sunny Slope Rd
City Bridgewater State NJ Zip Code 08807
FEC ID number of contributing federal political committee. **C**
Name of Employer FEDERATED DEPT STORE Occupation RETAIL
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **240.00**

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123669
Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... **195.00**
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 595 OF 2452 |
| | <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. Janet A Randall | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address 862 Jonive Rd. | | Transaction ID : 3134479 |
| City Sebastopol | State CA | Zip Code 95472 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 300.00 | |
| Name of Employer n/a | Occupation Retired | |
| 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) B. Mr. Gus Raney | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address Po Box 349 | | Transaction ID : 3134600 |
| City Belvedere Tiburon | State CA | Zip Code 94920 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 140.00 | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 265.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Ms. Linda Rankine | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address PO Box 2417 | | Transaction ID : 3129018 |
| City Easley | State SC | Zip Code 29641 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25.00 | |
| 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 ▼ 275.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 465.00 |
| 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 596 OF 2452 |
| | <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. Beverly Rapp | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address 6501 Galaxie Terrace | | Transaction ID : 3134721 |
| City Oklahoma City | State OK | Zip Code 73132 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 250.00 | |
| Name of Employer Beverly Rapp | Occupation psychotherapist | |
| 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. Marilyn Ratliff | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 17 / 2011 |
| Mailing Address 41 Romerly Rd. W | | Transaction ID : 3130581 |
| City Savannah | State GA | Zip Code 31411 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 250.00 | |
| Name of Employer n/a | Occupation retired | |
| 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. Joseph L. Rauh | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 09 / 2011 |
| Mailing Address 3506 Forestoak Ct. | | Transaction ID : 3125200 |
| City Cincinnati | State OH | Zip Code 45208 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 75.00 | |
| Name of Employer Children's Hospital | Occupation Physician | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 475.00 | |

| | |
|--|--------|
| 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: PAGE 597 OF 2452
(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. Joseph L. Rauh
 Full Name (Last, First, Middle Initial)
 Mailing Address 3506 Forestoak Ct.
 City Cincinnati State OH Zip Code 45208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Children's Hospital Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3135130
 Amount of Each Receipt this Period
 50.00

B. Ms. Ruth Rayle
 Full Name (Last, First, Middle Initial)
 Mailing Address 6880 Columbia Rd.
 City Olmsted Falls State OH Zip Code 44138
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3123963
 Amount of Each Receipt this Period
 200.00

C. Ms. Ruth Rayle
 Full Name (Last, First, Middle Initial)
 Mailing Address 6880 Columbia Rd.
 City Olmsted Falls State OH Zip Code 44138
 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
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131929
 Amount of Each Receipt this Period
 200.00

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 598 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Mr. Peter R. Raymond
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 Beverlee Dr.
 City Nashua State NH Zip Code 03064
 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 ▼ 225.00

Date of Receipt
 12 / 09 / 2011
Transaction ID : 3125225
 Amount of Each Receipt this Period
 225.00

B. Ms. Barbara C. Rayson
 Full Name (Last, First, Middle Initial)
 Mailing Address 8218 Maidencane PL
 City Port Saint Lucie State FL Zip Code 34952
 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 ▼ 675.00

Date of Receipt
 12 / 08 / 2011
Transaction ID : 3123970
 Amount of Each Receipt this Period
 100.00

C. Ms. Carol T. Rearick
 Full Name (Last, First, Middle Initial)
 Mailing Address 6154 Sundance TR.
 City Brighton State MI Zip Code 48116
 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 ▼ 3500.00

Date of Receipt
 12 / 14 / 2011
Transaction ID : 3128049
 Amount of Each Receipt this Period
 2500.00

| | |
|--|---------|
| 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 599 OF 2452 |
| | <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. Bonnie Recore
Full Name (Last, First, Middle Initial)
Mailing Address 3306 Willow Crescent Dr., Apt.
City State Zip Code
Fairfax VA 22030
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 ▼
225.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011
Transaction ID : 3132051
Amount of Each Receipt this Period
35.00

B. Ms. Martha Reddout
Full Name (Last, First, Middle Initial)
Mailing Address 326 Cayuga Creek Rd.
City State Zip Code
Alden NY 14004
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
N/A 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
12 / 17 / 2011
Transaction ID : 3130583
Amount of Each Receipt this Period
50.00

C. Ms. Karen B. Redlener
Full Name (Last, First, Middle Initial)
Mailing Address 41 Saldo Circle
City State Zip Code
New Rochelle NY 10804
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Montefiore Med Center Health Administrator
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
230.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011
Transaction ID : 3128921
Amount of Each Receipt this Period
15.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 100.00 |
| 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 600 OF 2452
(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. Robert L. Reece
 Full Name (Last, First, Middle Initial)
 Mailing Address 1569 Willard Street
 City San Francisco State CA Zip Code 94117
 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 ▼ 276.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128846
 Amount of Each Receipt this Period
 36.00

B. Dr. Barbara D. Reed
 Full Name (Last, First, Middle Initial)
 Mailing Address 2903 Craig Rd
 City Ann Arbor State MI Zip Code 48103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Michigan Occupation Physician
 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
 12 / 15 / 2011
Transaction ID : 3129346
 Amount of Each Receipt this Period
 25.00

C. Ms. June Ann Reese
 Full Name (Last, First, Middle Initial)
 Mailing Address 6302 Southwind Drive
 City Whittier State CA Zip Code 90601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Escrow Officer
 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
 12 / 15 / 2011
Transaction ID : 3128525
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 86.00
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 601 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Ms. Sandra L. Reeves | | Date of Receipt 12 / 03 / 2011 Transaction ID : 3119880 |
| Mailing Address 4904 Milam | | Amount of Each Receipt this Period 25.00 |
| City Houston | State TX | Zip Code 77006 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 325.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 325.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Joan H. Reeves | | Date of Receipt 12 / 20 / 2011 Transaction ID : 3133368 |
| Mailing Address 3901 Fremont Ave. N, Apt. 201 #201 | | Amount of Each Receipt this Period 100.00 |
| City Seattle | State WA | Zip Code 98103 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer Self | Occupation Artist | |
| 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. Richard Reidinger | | Date of Receipt 12 / 09 / 2011 Transaction ID : 3125672 |
| Mailing Address 11 Penny Lange | | Amount of Each Receipt this Period 25.00 |
| City Sperryville | State VA | Zip Code 22740 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 625.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 625.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 150.00 |
| 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 602 OF 2452
(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. Richard Reidinger

Mailing Address 11 Penny Lange

City Sperryville State VA Zip Code 22740

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 ▼ **625.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011

Transaction ID : 3127822

Amount of Each Receipt this Period
50.00

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

Mailing Address 11 Penny Lange

City Sperryville State VA Zip Code 22740

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 ▼ **625.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129174

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Mr. George W. Reimer

Mailing Address 74515 Dobie Ln.

City Covelo State CA Zip Code 95428

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

Name of Employer REQUESTED Occupation REITRED

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
 12 / 09 / 2011

Transaction ID : 3125879

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **90.00**

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 603 OF 2452
(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 W. Reimer
 Full Name (Last, First, Middle Initial)
 Mailing Address 74515 Dobie Ln.
 City State Zip Code
 Covelo CA 95428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED REITRED
 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
 12 / 16 / 2011
Transaction ID : 3131534
 Amount of Each Receipt this Period
 25.00

B. Ms. Linda C Reinisch
 Full Name (Last, First, Middle Initial)
 Mailing Address 6508 81ST ST
 City State Zip Code
 Cabin John MD 20818
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 self arts administrator
 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
 12 / 15 / 2011
Transaction ID : 3128996
 Amount of Each Receipt this Period
 25.00

C. Ms. Joyce A Reis
 Full Name (Last, First, Middle Initial)
 Mailing Address 5423 N. Central Avenue
 City State Zip Code
 Chicago IL 60630
 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 ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3124942
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 604 OF 2452 |
| | <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. Dr. Betty E. Reiss
 Full Name (Last, First, Middle Initial)
 Mailing Address 3512 SE Oak Street
 City Portland State OR Zip Code 97214
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2011
Transaction ID : 3138510
 Amount of Each Receipt this Period
 150.00

B. Ms. Anita Reith
 Full Name (Last, First, Middle Initial)
 Mailing Address 10080 Fuerte Dr.
 City La Mesa State CA Zip Code 91941
 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 ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133377
 Amount of Each Receipt this Period
 125.00

C. Mrs. Waltraud Rennick
 Full Name (Last, First, Middle Initial)
 Mailing Address 2593 Stagsleap Pt.
 City Colorado Springs State CO Zip Code 80904
 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 ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2011
Transaction ID : 3135668
 Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 375.00 |
| 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 605 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|-----------------------|---|
| Full Name (Last, First, Middle Initial) A. Ms. Ann Reno | | Date of Receipt 12 / 15 / 2011 Transaction ID : 3128692 |
| Mailing Address 2 Collingswood Place | | Amount of Each Receipt this Period 30.00 |
| City Flanders | State NJ | |
| Zip Code 07836 | | Aggregate Year-to-Date ▼ 450.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation retired | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|---|-----------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Ann Reno | | Date of Receipt 12 / 20 / 2011 Transaction ID : 3132983 |
| Mailing Address 2 Collingswood Place | | Amount of Each Receipt this Period 35.00 |
| City Flanders | State NJ | |
| Zip Code 07836 | | Aggregate Year-to-Date ▼ 450.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation retired | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|-----------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Sandra Resner | | Date of Receipt 12 / 10 / 2011 Transaction ID : 3125677 |
| Mailing Address 7607 middle dr. | | Amount of Each Receipt this Period 50.00 |
| City Greensboro | State NC | |
| Zip Code 27409 | | Aggregate Year-to-Date ▼ 220.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation retired | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 115.00 |
| 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 606 OF 2452
(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 Resnik
 Full Name (Last, First, Middle Initial)
 Mailing Address 403 Saint Ronan St.
 City State Zip Code
 New Haven CT 06511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Yale Law School Law Professor
 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
 12 / 19 / 2011
Transaction ID : 3132023
 Amount of Each Receipt this Period
 125.00

B. Caroline Isber Reuter
 Full Name (Last, First, Middle Initial)
 Mailing Address 4301 Massachusetts Ave. NW #A2
 City State Zip Code
 Washington DC 20016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Environmental Consul
 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
 12 / 14 / 2011
Transaction ID : 3127824
 Amount of Each Receipt this Period
 250.00

C. Ms. Ellanor Revenga
 Full Name (Last, First, Middle Initial)
 Mailing Address 2811 S Woodrow St Apt E
 City State Zip Code
 Arlington VA 22206
 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 ▼
 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132497
 Amount of Each Receipt this Period
 150.00

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 607 OF 2452 |
| | <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. Douglas Revero
Full Name (Last, First, Middle Initial)
Mailing Address 98-419 Ponoahale St.
City State Zip Code
Aiea HI 96701
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 ▼
212.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2011
Transaction ID : 3133521
Amount of Each Receipt this Period
50.00

B. Ms. Sarah Reves
Full Name (Last, First, Middle Initial)
Mailing Address 4414 Twisted Tree Drive
City State Zip Code
Austin TX 78735
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Texas Department of Aging and Disabili Occupational Therapist
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011
Transaction ID : 3129473
Amount of Each Receipt this Period
20.00

C. Ms. G. Elva Revilla
Full Name (Last, First, Middle Initial)
Mailing Address 5695 N Williamston Rd.
City State Zip Code
Williamston MI 48895
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 ▼
475.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2011
Transaction ID : 3134437
Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional)..... **195.00**
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 608 OF 2452 |
| | <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. Joan Reynolds
Full Name (Last, First, Middle Initial)
Mailing Address 23 Idlewood

| | | |
|----------------|-------------|-------------------|
| City Bethel | State CT | Zip Code 06801 |
|----------------|-------------|-------------------|

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

| | |
|--|-----------------------------------|
| Name of Employer Volusia County Mediation Svcs. | Occupation Program Coordinator |
|--|-----------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128893

Amount of Each Receipt this Period

| |
|--------|
| 400.00 |
|--------|

B. Ms. Eleanor Rhoades
Full Name (Last, First, Middle Initial)
Mailing Address 845 Los Robles Road

| | | |
|-------------------|-------------|-------------------|
| City Palo Alto | State CA | Zip Code 94306 |
|-------------------|-------------|-------------------|

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 ▼ **480.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128609

Amount of Each Receipt this Period

| |
|-------|
| 40.00 |
|-------|

C. Mr. Virginia P Rice
Full Name (Last, First, Middle Initial)
Mailing Address 54 Whiteoaks Circle

| | | |
|------------------|-------------|-------------------|
| City Bluffton | State SC | Zip Code 29910 |
|------------------|-------------|-------------------|

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

| | |
|-----------------------------|--------------------------------|
| Name of Employer retired | Occupation Office assistant |
|-----------------------------|--------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 24 | / | 2011 |

Transaction ID : 3135646

Amount of Each Receipt this Period

| |
|-------|
| 40.00 |
|-------|

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 100.00 |
| 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 609 OF 2452 |
| | <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. Joan L. Rich
Full Name (Last, First, Middle Initial)
Mailing Address 818 SE 4th St., Apt. 302

| | | |
|-------------------------|-------------|-------------------|
| City Fort Lauderdale | State FL | Zip Code 33301 |
|-------------------------|-------------|-------------------|

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

| | |
|----------------------------|----------------------|
| Name of Employer Pisces | Occupation Retail |
|----------------------------|----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3134377

Amount of Each Receipt this Period
100.00

B. Ms. Donna I. Rich
Full Name (Last, First, Middle Initial)
Mailing Address 6830 S.W. 48th Terrace

| | | |
|---------------|-------------|-------------------|
| City Miami | State FL | Zip Code 33155 |
|---------------|-------------|-------------------|

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

| | |
|--|-------------------------------------|
| Name of Employer Rio Palenque Research Corp | Occupation Environmental Chemist |
|--|-------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128622

Amount of Each Receipt this Period
50.00

C. Ms. Tak Richards
Full Name (Last, First, Middle Initial)
Mailing Address 361 Neva Street

| | | |
|--------------------|-------------|-------------------|
| City Sebastopol | State CA | Zip Code 95472 |
|--------------------|-------------|-------------------|

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 ▼
220.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129399

Amount of Each Receipt this Period
20.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 170.00 |
| 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 610 OF 2452 |
| | <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. Julia Richter
Full Name (Last, First, Middle Initial)

Mailing Address 8022 Taunton Road

City Indianapolis State IN Zip Code 46260

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

Name of Employer none Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2011

Transaction ID : 3131217

Amount of Each Receipt this Period
 25.00

B. Ms. Karen E. Richter
Full Name (Last, First, Middle Initial)

Mailing Address 428 Raymond St

City Rockville Centre State NY Zip Code 11570

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

Name of Employer none Occupation Mom

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
 12 / 23 / 2011

Transaction ID : 3135655

Amount of Each Receipt this Period
 50.00

C. Ms. Laurose Richter
Full Name (Last, First, Middle Initial)

Mailing Address 620 Sand Hill Rd., Apt. 206C #
Apartment 206C

City Palo Alto State CA Zip Code 94304

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

Name of Employer retired Occupation housewife

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3131827

Amount of Each Receipt this Period
 140.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 215.00

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 611 OF 2452 |
| | (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. Sarah Byrn Byn Rickman
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 North Johanna Drive
 City Centerville State OH Zip Code 45459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self employed Occupation author / editor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3122746
 Amount of Each Receipt this Period
 200.00

B. Ms. Jean Riddell
 Full Name (Last, First, Middle Initial)
 Mailing Address 4824 Harness Ct.
 City Parker State CO Zip Code 80134
 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 ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : 3135311
 Amount of Each Receipt this Period
 1000.00

C. Mr. Stuart A. Riddle
 Full Name (Last, First, Middle Initial)
 Mailing Address P. O. Box 3189
 City Manhattan Beach State CA Zip Code 90266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation real estate developm
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119360
 Amount of Each Receipt this Period
 30.00

| | |
|--|---------|
| 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 612 OF 2452 |
| | <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. John Ritsher | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 |
| Mailing Address 119 Forest St | | Transaction ID : 3135710 |
| City Norwell | State MA | Zip Code 2061 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| 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 ▼ 220.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Kimberly K. Ritzheimer | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2011 |
| Mailing Address 20578 East Buchanan Drive | | Transaction ID : 3126751 |
| City Aurora | State CO | Zip Code 80011 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| Name of Employer Dept. of Defense | Occupation Information Analyst | |
| 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. G. K. S. Roberts | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 366 Sandcastle Ky. | | Transaction ID : 3131910 |
| City Secaucus | State NJ | Zip Code 07094 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 125.00 |
| Name of Employer n/a | Occupation Retired | |
| 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).....▶ | 170.00 |
| 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 613 OF 2452
(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. Jacquelyn Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 232 Old Reddish School Road
 City State Zip Code
 Silex MO 63377
 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 ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130596
 Amount of Each Receipt this Period
 300.00

B. Ms. Teresa Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 2564 Greer Road
 City State Zip Code
 Palo Alto CA 94303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Intuit computer software de
 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
 12 / 31 / 2011
Transaction ID : 3138981
 Amount of Each Receipt this Period
 500.00

C. Ms. Shirley M. Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 95 Skidaway Island Park RD Apt
 City State Zip Code
 Savannah GA 31411
 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
 12 / 09 / 2011
Transaction ID : 3125187
 Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 830.00
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 614 OF 2452 |
| | <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. Dr. Larry S Roberts
 Full Name (Last, First, Middle Initial)
 Mailing Address 437 Fellowship Circle
 City Gaithersburg State MD Zip Code 20877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation biologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 12 / 05 / 2011
Transaction ID : 3121241
 Amount of Each Receipt this Period
 4800.00

B. Ms. Stella M. Robertson
 Full Name (Last, First, Middle Initial)
 Mailing Address 7045 Shadow Creek Court
 City Fort Worth State TX Zip Code 76132
 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 ▼ 500.00

Date of Receipt
 12 / 28 / 2011
Transaction ID : 3136951
 Amount of Each Receipt this Period
 250.00

C. Ms. Emily Robertson
 Full Name (Last, First, Middle Initial)
 Mailing Address 505 Jefferson Ave., 19th Floor
 City Toledo State OH Zip Code 43604
 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 ▼ 650.00

Date of Receipt
 12 / 19 / 2011
Transaction ID : 3132379
 Amount of Each Receipt this Period
 50.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 5100.00 |
| 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 615 OF 2452 |
| | <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. Claire Robertson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3502 William Court
 City Bloomington State IN Zip Code 47401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ohio state university Occupation Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **450.00**

Date of Receipt
 12 / 28 / 2011
Transaction ID : 3137466
 Amount of Each Receipt this Period
200.00

B. Ms. Nina Robins
 Full Name (Last, First, Middle Initial)
 Mailing Address 32253 Barkley St.
 City Livonia State MI Zip Code 48154
 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 **212.00**

Date of Receipt
 12 / 19 / 2011
Transaction ID : 3132221
 Amount of Each Receipt this Period
112.00

C. Dr. Nancy M. Robinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5005 N.e. 45TH Street Apt 704
 City Seattle State WA Zip Code 98105
 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 **300.00**

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3128556
 Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... **337.00**
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 616 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|-----------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Ms. Barbara Robinson | | Date of Receipt 12 / 25 / 2011 Transaction ID : 3135699 |
| Mailing Address 552 Old Colony Lane | | Amount of Each Receipt this Period 25.00 |
| City Virginia Beach | State VA | |
| Zip Code 23452 | | Aggregate Year-to-Date ▼ 300.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Sunny Day Guide | Occupation Publication Manager | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|-----------------------|---|
| Full Name (Last, First, Middle Initial) B. Dr. Jan Rocek | | Date of Receipt 12 / 14 / 2011 Transaction ID : 3128081 |
| Mailing Address 4031 Kennett Pike, Unit 24 | | Amount of Each Receipt this Period 100.00 |
| City Greenville | State DE | |
| Zip Code 19807 | | Aggregate Year-to-Date ▼ 350.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|--|-----------------------|---|
| Full Name (Last, First, Middle Initial) C. Dr. Suzanne H Rodgers | | Date of Receipt 12 / 20 / 2011 Transaction ID : 3133162 |
| Mailing Address 169 Huntington Hills | | Amount of Each Receipt this Period 150.00 |
| City Rochester | State NY | |
| Zip Code 14622 | | Aggregate Year-to-Date ▼ 275.00 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation retired | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 275.00 |
| 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 617 OF 2452 |
| | <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. Mary L L. Rodrick | | Date of Receipt 12 / 15 / 2011 Transaction ID : 3128916 |
| Mailing Address 14 Peabody Avenue | | Amount of Each Receipt this Period 20.00 |
| City Beverly | State MA | Zip Code 01915 |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date 240.00 |
| 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. Mr. Ramon E. Rodriguez | | Date of Receipt 12 / 07 / 2011 Transaction ID : 3123376 |
| Mailing Address 10031 SW 39th Ter. | | Amount of Each Receipt this Period 50.00 |
| City Miami | State FL | Zip Code 33165 |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date 300.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-----------------------|--|
| Full Name (Last, First, Middle Initial) C. Mr. Steve C. Roehm | | Date of Receipt 12 / 14 / 2011 Transaction ID : 3128132 |
| Mailing Address 140 Riverside Blvd - apt 2501 | | Amount of Each Receipt this Period 50.00 |
| City New York | State NY | Zip Code 10069 |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date 295.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 120.00 |
| 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 618 OF 2452 |
| | <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. Mr. Steve C. Roehm
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 Riverside Blvd - apt 2501
 City New York State NY Zip Code 10069
 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 ▼ 295.00

Date of Receipt 12 / 28 / 2011
Transaction ID : 3137552
 Amount of Each Receipt this Period 250.00

B. Ms. Stephanie Rogall
 Full Name (Last, First, Middle Initial)
 Mailing Address 16107 HURON DRIVE
 City Sun City West State AZ Zip Code 85375
 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 ▼ 500.00

Date of Receipt 12 / 14 / 2011
Transaction ID : 3128042
 Amount of Each Receipt this Period 250.00

C. Mr. Brian Rogers
 Full Name (Last, First, Middle Initial)
 Mailing Address 3754 S 91St East Ave
 City Tulsa State OK Zip Code 74145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cherokee Nation Businesses Occupation Security Architect
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 502.11

Date of Receipt 12 / 31 / 2011
Transaction ID : 3139208
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 295.00
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 619 OF 2452 |
| | <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. Abby Rogers
Full Name (Last, First, Middle Initial)
Mailing Address 1 Stonepath Court

| | | |
|-------------------|-------------|-------------------|
| City Rockville | State MD | Zip Code 20854 |
|-------------------|-------------|-------------------|

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 ▼
240.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129150

Amount of Each Receipt this Period
200.00

B. Ms. Patsy Rogers
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 616

| | | |
|---------------------|-------------|-------------------|
| City New Suffolk | State NY | Zip Code 11956 |
|---------------------|-------------|-------------------|

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

| | |
|--------------------------|--------------------------------|
| Name of Employer Self | Occupation COMPOSER TEACHER |
|--------------------------|--------------------------------|

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129791

Amount of Each Receipt this Period
250.00

C. Sylvia Rolfs
Full Name (Last, First, Middle Initial)
Mailing Address 27494 682Nd St.

| | | |
|----------------|-------------|-------------------|
| City Kasson | State MN | Zip Code 55944 |
|----------------|-------------|-------------------|

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 ▼
275.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 06 | / | 2011 |

Transaction ID : 3121850

Amount of Each Receipt this Period
50.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 320.00 |
| 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 620 OF 2452 |
| | <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. James L. Rolleston | | Date of Receipt |
| Mailing Address 32 Green Mill Lane | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Durham | NC | 27707 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3128668 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| Duke University | Professor | <input type="text" value="25.00"/> |
| 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. Marcella K. Rolnick | | Date of Receipt |
| Mailing Address 563 Delaware Avenue | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Akron | OH | 44303 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3129443 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| GOJO Industries | Management | <input type="text" value="18.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="216.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Barbara Josephine Rolph | | Date of Receipt |
| Mailing Address 256 Sycamore Avenue | | <input type="text" value="12"/> / <input type="text" value="18"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Mill Valley | CA | 94941 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3131032 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| n/a | retired | <input type="text" value="18.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="216.00"/> | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="61.00"/> |
| 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 621 OF 2452 |
| | <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. Martha M Rosacker
 Full Name (Last, First, Middle Initial)
 Mailing Address 1870 Wyoming Ave NW #502
 #502
 City Washington State DC Zip Code 20009
 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 ▼ 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2011
Transaction ID : 3130984
 Amount of Each Receipt this Period
 200.00

B. Ms. Teresa Rose
 Full Name (Last, First, Middle Initial)
 Mailing Address 1121 Gannon Dr
 City Plano State TX Zip Code 75025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Princeton ISD Occupation Teacher
 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
 12 / 17 / 2011
Transaction ID : 3130604
 Amount of Each Receipt this Period
 25.00

C. Ms. Sally Rosen
 Full Name (Last, First, Middle Initial)
 Mailing Address 3802 Shenandoah
 City Dallas State TX Zip Code 75205
 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 M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3125083
 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 622 OF 2452 |
| | (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. Beatrice G Rosenberg
Full Name (Last, First, Middle Initial)
Mailing Address 379 Savage Farm Drive

| | | |
|---|------------------------------------|-------------------|
| City Ithaca | State NY | Zip Code 14850 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 245.75 | |

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011
Transaction ID : 3132077

Amount of Each Receipt this Period
40.00

B. Ms. Beatrice G Rosenberg
Full Name (Last, First, Middle Initial)
Mailing Address 379 Savage Farm Drive

| | | |
|---|------------------------------------|-------------------|
| City Ithaca | State NY | Zip Code 14850 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 245.75 | |

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2011
Transaction ID : 3133204

Amount of Each Receipt this Period
45.00

C. Dr. Lucille Rosenberg
Full Name (Last, First, Middle Initial)
Mailing Address 3431 N Lake Dr.

| | | |
|---|------------------------------------|-------------------|
| City Milwaukee | State WI | Zip Code 53211 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 515.00 | |

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2011
Transaction ID : 3134558

Amount of Each Receipt this Period
265.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 350.00 |
| 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 623 OF 2452
(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. Eleanor Rosenberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 73 Storm Dr
 City Holtsville State NY Zip Code 11742
 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 ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2011
Transaction ID : 3135733
 Amount of Each Receipt this Period
 200.00

B. Ms. Joan Rosenblatt
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 King Farm Blvd., Apt. 630
 City Rockville State MD Zip Code 20850
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134778
 Amount of Each Receipt this Period
 55.00

C. Ms. Risa Rosenburg
 Full Name (Last, First, Middle Initial)
 Mailing Address 149 Newcomb Rd
 City Tenafly State NJ Zip Code 07670
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134675
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 624 OF 2452 |
| | <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. Camilla M Rosenfeld
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 Coventry Court
 City State Zip Code
 Purchase NY 10577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 none Homemaker
 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
 12 / 15 / 2011
Transaction ID : 3128425
 Amount of Each Receipt this Period
 150.00

B. Ms. Sylvia Rosenfield
 Full Name (Last, First, Middle Initial)
 Mailing Address 502 Moorings Circle
 City State Zip Code
 Arnold MD 21012
 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 ▼
 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2011
Transaction ID : 3119803
 Amount of Each Receipt this Period
 50.00

C. Ms. Ruth Rosenthal
 Full Name (Last, First, Middle Initial)
 Mailing Address 939 Lynn Dr.
 City State Zip Code
 Valley Stream NY 11580
 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 ▼
 415.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133466
 Amount of Each Receipt this Period
 115.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 315.00 |
| 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 625 OF 2452
(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. Patricia Rosenthal
 Full Name (Last, First, Middle Initial)
 Mailing Address 4406 Park Ln
 City Dallas State TX Zip Code 75220
 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 ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3125678
 Amount of Each Receipt this Period
 1000.00

B. Ms. Ann Rosewater
 Full Name (Last, First, Middle Initial)
 Mailing Address 629 Cresthill Avenue, NE
 City Atlanta State GA Zip Code 30306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation Consultant
 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
 12 / 08 / 2011
Transaction ID : 3123951
 Amount of Each Receipt this Period
 1000.00

C. Ms. Dena Ross
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 Vista del Cerro
 City Santa Fe State NM Zip Code 87508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer alan's of belmont shore, inc Occupation retail
 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
 12 / 20 / 2011
Transaction ID : 3132993
 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 626 OF 2452 |
| | <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. Janice G. Rosse
 Full Name (Last, First, Middle Initial)
 Mailing Address 78 Lakeview
 City Irvine State CA Zip Code 92604
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2011
Transaction ID : 3135357
 Amount of Each Receipt this Period
 150.00

B. Ms. Judith A. Rosselli
 Full Name (Last, First, Middle Initial)
 Mailing Address 5521 Dalen ave
 City San Diego State CA Zip Code 92122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired Teacher
 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
 12 / 09 / 2011
Transaction ID : 3125679
 Amount of Each Receipt this Period
 50.00

C. Dr. Amy Y. Rossman
 Full Name (Last, First, Middle Initial)
 Mailing Address 11400 Hennessey Dr.
 City Beltsville State MD Zip Code 20705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer USDA Occupation Scientist
 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
 12 / 05 / 2011
Transaction ID : 3121102
 Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 300.00 |
| 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 627 OF 2452
(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. Katherine B. Rosvall
 Full Name (Last, First, Middle Initial)
 Mailing Address 3286 Sugarbush Ter
 City State Zip Code
 Vista CA 92084
 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 ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129351
 Amount of Each Receipt this Period
 35.00

B. Ms. Linda Roth
 Full Name (Last, First, Middle Initial)
 Mailing Address 150 Southgate Rd
 City State Zip Code
 Sacramento CA 95815
 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 ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130908
 Amount of Each Receipt this Period
 250.00

C. Ms. Susan Roth
 Full Name (Last, First, Middle Initial)
 Mailing Address 1541 Teakwood Ave.
 City State Zip Code
 Cincinnati OH 45224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 University of Cincinnati Educator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129169
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 305.00
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 628 OF 2452 |
| | (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. Mr. Don M. Rothberg
Full Name (Last, First, Middle Initial)

Mailing Address 3232 Woodley Rd NW

City Washington State DC Zip Code 20008

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 ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3132382

Amount of Each Receipt this Period
 100.00

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

Mailing Address 5912 State Highway 41

City Lamy State NM Zip Code 87540

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
 12 / 21 / 2011

Transaction ID : 3133659

Amount of Each Receipt this Period
 250.00

C. Mr. Michael Rothrock
Full Name (Last, First, Middle Initial)

Mailing Address 471 Greenway Ave.

City Satellite Beach State FL Zip Code 32937

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

Name of Employer AT&T Occupation Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 665.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011

Transaction ID : 3128205

Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| 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 629 OF 2452 |
| | <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. Mr. Michael Rothrock
Full Name (Last, First, Middle Initial)

Mailing Address 471 Greenway Ave.

City State Zip Code
Satellite Beach FL 32937

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

Name of Employer Occupation
AT&T Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
665.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 17 / 2011

Transaction ID : 3131286

Amount of Each Receipt this Period
20.00

B. Ms. Paula D. Rothschild
Full Name (Last, First, Middle Initial)

Mailing Address 51 Edgewood Rd.

City State Zip Code
Wayland MA 01778

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

Name of Employer Occupation
Medical Center physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 28 / 2011

Transaction ID : 3135206

Amount of Each Receipt this Period
125.00

C. Mrs. Leonore H Rowe
Full Name (Last, First, Middle Initial)

Mailing Address 9200 Craig

City State Zip Code
Overland Park KS 66212

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 ▼
215.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 16 / 2011

Transaction ID : 3130611

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 245.00 |
| 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 630 OF 2452 |
| | <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. Judith S Rowe
Full Name (Last, First, Middle Initial)
Mailing Address 4701 Willard Ave. Apt. 405

| | | |
|---|------------------------------------|-------------------|
| City Chevy Chase | State MD | Zip Code 20815 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 475.00 | |

Date of Receipt
12 / 04 / 2011
Transaction ID : 3119866

Amount of Each Receipt this Period
25.00

B. Ms. Jean S. Rowland
Full Name (Last, First, Middle Initial)
Mailing Address 1805 Lakeside Dr Unit C

| | | |
|---|------------------------------------|-------------------|
| City Champaign | State IL | Zip Code 61821 |
| 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 ▼ 400.00 | |

Date of Receipt
12 / 11 / 2011
Transaction ID : 3125992

Amount of Each Receipt this Period
30.00

C. Ms. Jane G. Rozoff
Full Name (Last, First, Middle Initial)
Mailing Address 601 Mulberry Place # 41

| | | |
|---|-------------------------------------|-------------------|
| City Highland Park | State IL | Zip Code 60035 |
| 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 ▼ 1400.00 | |

Date of Receipt
12 / 27 / 2011
Transaction ID : 3134736

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 155.00 |
| 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 631 OF 2452 |
| | <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. Mr. Andrew Rubel
Full Name (Last, First, Middle Initial)

Mailing Address 17 Yorktown St

| | | |
|--------------------|-------------|-------------------|
| City Somerville | State MA | Zip Code 02144 |
|--------------------|-------------|-------------------|

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

| | |
|--------------------------|----------------------------|
| Name of Employer self | Occupation cartographer |
|--------------------------|----------------------------|

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 |
| 12 | / | 14 | / | 2011 |

Transaction ID : 3128141

Amount of Each Receipt this Period
100.00

B. Ms. Linda Ruder
Full Name (Last, First, Middle Initial)

Mailing Address 2238 Egandale Rd.

| | | |
|-----------------------|-------------|-------------------|
| City Highland Park | State IL | Zip Code 60035 |
|-----------------------|-------------|-------------------|

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

| | |
|-------------------------------|-----------------------------------|
| Name of Employer REQUESTED | Occupation Housewife/Volunteer |
|-------------------------------|-----------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
302.12

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3134469

Amount of Each Receipt this Period
100.00

C. Ms. Avima M Ruder
Full Name (Last, First, Middle Initial)

Mailing Address 3316 Woodford Road

| | | |
|--------------------|-------------|-------------------|
| City Cincinnati | State OH | Zip Code 45213 |
|--------------------|-------------|-------------------|

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

| | |
|------------------------------------|------------------------------|
| Name of Employer USDHHS/PHS/CDC | Occupation epidemiologist |
|------------------------------------|------------------------------|

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 |
| 12 | / | 13 | / | 2011 |

Transaction ID : 3126710

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 300.00 |
| 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 632 OF 2452 |
| | <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. Claire Rudolph
Full Name (Last, First, Middle Initial)
Mailing Address 6789 Knollwood Rd.
City Fayetteville State NY Zip Code 13066
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 **390.00**

Date of Receipt **12 / 19 / 2011**
Transaction ID : 3132114
Amount of Each Receipt this Period **115.00**

B. Mr. Karl M. Ruppenthal
Full Name (Last, First, Middle Initial)
Mailing Address 820 Euclid Ave.
City Berkeley State CA Zip Code 94708
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 **565.00**

Date of Receipt **12 / 19 / 2011**
Transaction ID : 3132038
Amount of Each Receipt this Period **115.00**

C. Ms. Judith Russell
Full Name (Last, First, Middle Initial)
Mailing Address 2426 Westside Drive
City North Chili State NY Zip Code 14514
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Farmer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **600.00**

Date of Receipt **12 / 15 / 2011**
Transaction ID : 3128505
Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional)..... **280.00**
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 633 OF 2452 |
| | <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. James Rutherford | | Date of Receipt 12 / 14 / 2011 Transaction ID : 3127858 |
| Mailing Address 1809 8th St. | | Amount of Each Receipt this Period 250.00 |
| City Berkeley | State CA | Zip Code 94710 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 550.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr. John Rutledge | | Date of Receipt 12 / 09 / 2011 Transaction ID : 3125875 |
| Mailing Address 56 monument st | | Amount of Each Receipt this Period 50.00 |
| City Medford | State MA | Zip Code 02155 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Bullhorn, Inc. | Occupation Software Engineer | |
| 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. Ms. Elisabeth Rutledge | | Date of Receipt 12 / 22 / 2011 Transaction ID : 3134086 |
| Mailing Address 7179 Dalewood Ln. | | Amount of Each Receipt this Period 500.00 |
| City Dallas | State TX | Zip Code 75214 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Public Strategies, Inc. | Occupation Consultant | |
| 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).....▶ | 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 634 OF 2452 |
| | <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. Pamela M. Ryan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1000 Rio Grande St.
 City Austin State TX Zip Code 78701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation Psychologist
 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
 12 / 08 / 2011
Transaction ID : 3124812
 Amount of Each Receipt this Period
 1000.00

B. Mr. John Ryba
 Full Name (Last, First, Middle Initial)
 Mailing Address 502 Bradley Ave.
 City Bay Minette State AL Zip Code 36507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US govt Occupation USCG Retired
 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
 12 / 17 / 2011
Transaction ID : 3131291
 Amount of Each Receipt this Period
 25.00

C. Bob Rymer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1477 Kinloch Ln.
 City Mount Pleasant State SC Zip Code 29464
 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 ▼ 262.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3121869
 Amount of Each Receipt this Period
 62.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1087.00 |
| 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 635 OF 2452 |
| | <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. Nora H Sabelli
Full Name (Last, First, Middle Initial)

Mailing Address 1964 Shuey Ave

City Walnut Creek State CA Zip Code 94596

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

Name of Employer SRI International Occupation Research administrat

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
 12 / 14 / 2011

Transaction ID : 3127861

Amount of Each Receipt this Period
250.00

B. Dr. Joy F Sabl
Full Name (Last, First, Middle Initial)

Mailing Address 7008 Willard St

City Pittsburgh State PA Zip Code 15208

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

Name of Employer duquesne University (volunteer) Occupation volunteer researcher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011

Transaction ID : 3125830

Amount of Each Receipt this Period
15.00

C. Ms. Paula L. W. Sabloff
Full Name (Last, First, Middle Initial)

Mailing Address 321 Calle Loma Norte

City Santa Fe State NM Zip Code 87501

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

Name of Employer Santa Fe Institute Occupation Professor

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
 12 / 08 / 2011

Transaction ID : 3124537

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **515.00**

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 636 OF 2452 |
| | <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. Alice Sachs
 Full Name (Last, First, Middle Initial)
 Mailing Address 21074 SW 90th Avenue
 City Tualatin State OR Zip Code 97062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Psychologist-Retired
 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
 12 / 10 / 2011
Transaction ID : 3125921
 Amount of Each Receipt this Period
 25.00

B. Mr. Bruce Sagan
 Full Name (Last, First, Middle Initial)
 Mailing Address 2059 Georgetown Blvd
 City Ann Arbor State MI Zip Code 48105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MSU Occupation Professor
 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
 12 / 17 / 2011
Transaction ID : 3130619
 Amount of Each Receipt this Period
 100.00

C. Mr. David Saltonstall
 Full Name (Last, First, Middle Initial)
 Mailing Address 235 E 22nd St., Apt. 4K
 City New York State NY Zip Code 10010
 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 M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133421
 Amount of Each Receipt this Period
 100.00

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 225.00 |
| 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 637 OF 2452 |
| | <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. Ruth Salzman
Full Name (Last, First, Middle Initial)

Mailing Address 800 West End Ave.
#9D

City New York State NY Zip Code 10025

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

Name of Employer Russell Berrie Foundation Occupation foundation executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1175.00

Date of Receipt
12 / 04 / 2011
Transaction ID : 3119805

Amount of Each Receipt this Period
50.00

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

Mailing Address 1707 Black Oak Ln

City Silver Spring State MD Zip Code 20910

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

Name of Employer Self Occupation Clinical Social Worker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123345

Amount of Each Receipt this Period
300.00

C. Ms. Ruth J. J. Samber
Full Name (Last, First, Middle Initial)

Mailing Address 8 Mitchell Place

City Manhasset State NY Zip Code 11030

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

Name of Employer none Occupation retired educator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
12 / 30 / 2011
Transaction ID : 3138655

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 360.00

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 638 OF 2452 |
| | <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. Joanne M Sanders | | Date of Receipt |
| Mailing Address 5144 Carrollton Ave | | <input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Indianapolis | IN | 46205 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3130951 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| IATSE | Int'l Rep | <input type="text" value="100.00"/> |
| 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. Dr. Mary M. Sanders | | Date of Receipt |
| Mailing Address 18 Timber Lane | | <input type="text" value="12"/> / <input type="text" value="23"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Woodbridge | CT | 06525 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3135614 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| University of Connecticut Health Cente | Physician | <input type="text" value="25.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="230.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Nancy Sansone | | Date of Receipt |
| Mailing Address 2447 Skyline Dr | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Bloomington | MN | 55425 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3128786 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| n/a | Retired | <input type="text" value="25.00"/> |
| 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="150.00"/> |
| 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 639 OF 2452 |
| | <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. Ann H Santen
Full Name (Last, First, Middle Initial)
Mailing Address 8000 Varner Rd.
City Cincinnati State OH Zip Code 45243
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 ▼ 350.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3131861
Amount of Each Receipt this Period
100.00

B. Ms. Ann Sargent
Full Name (Last, First, Middle Initial)
Mailing Address 432 Ridgewood Avenue
City Minneapolis State MN Zip Code 55403
FEC ID number of contributing federal political committee. **C**
Name of Employer Tech-Pro, Inc. Occupation Forms designer/devel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
12 / 31 / 2011
Transaction ID : 3139157
Amount of Each Receipt this Period
250.00

C. Ms. Gaile Sarma
Full Name (Last, First, Middle Initial)
Mailing Address 140 Autumn Hill Rd
City Princeton State NJ Zip Code 08540
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 ▼ 1400.00

Date of Receipt
12 / 08 / 2011
Transaction ID : 3124540
Amount of Each Receipt this Period
100.00

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 640 OF 2452
(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. Jeannette Saubert
 Full Name (Last, First, Middle Initial)
 Mailing Address 164 Palm Drive, Apt. 6
 City Naples State FL Zip Code 34112
 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 ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119400
 Amount of Each Receipt this Period
 250.00

B. Ms. Kathleen J Savicki
 Full Name (Last, First, Middle Initial)
 Mailing Address 388 Maple Hill Drive NW
 City Salem State OR Zip Code 97304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Marion County Occupation Social Worker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3125757
 Amount of Each Receipt this Period
 100.00

C. Mr. Nathan Savin
 Full Name (Last, First, Middle Initial)
 Mailing Address 216 Magowan Ave
 City Iowa City State IA Zip Code 52246
 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 ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119119
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
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 641 OF 2452 |
| | <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. Beverly B. Savitt
Full Name (Last, First, Middle Initial)

Mailing Address 9 Fern Ave.

| | | |
|---------------------------|-------------|-------------------|
| City Belvedere Tiburon | State CA | Zip Code 94920 |
|---------------------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3134775

Amount of Each Receipt this Period
250.00

B. Ms. Cynthia Sawtell
Full Name (Last, First, Middle Initial)

Mailing Address 16 Hampton Ave

| | | |
|---------------------|-------------|-------------------|
| City San Anselmo | State CA | Zip Code 94960 |
|---------------------|-------------|-------------------|

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 ▼
350.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 18 | / | 2011 |

Transaction ID : 3131223

Amount of Each Receipt this Period
25.00

C. Ms. Marianne Sayers
Full Name (Last, First, Middle Initial)

Mailing Address 4143 Jace Ct

| | | |
|----------------|-------------|-------------------|
| City Estero | State FL | Zip Code 33928 |
|----------------|-------------|-------------------|

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

| | |
|--------------------------|------------------------------|
| Name of Employer self | Occupation court reporter |
|--------------------------|------------------------------|

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 |
| 12 | / | 13 | / | 2011 |

Transaction ID : 3126783

Amount of Each Receipt this Period
25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 300.00 |
| 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 642 OF 2452 |
| | <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 C. Saylor
Full Name (Last, First, Middle Initial)
Mailing Address 7045 Skyline Blvd.
City Oakland State CA Zip Code 94611
FEC ID number of contributing federal political committee. **C**
Name of Employer The Nature Conservancy Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 415.00

Date of Receipt 12 / 20 / 2011
Transaction ID : 3133344
Amount of Each Receipt this Period 215.00

B. Ms. Sharon E. Schachter
Full Name (Last, First, Middle Initial)
Mailing Address 516 Bryan Street SE
City Atlanta State GA Zip Code 30312
FEC ID number of contributing federal political committee. **C**
Name of Employer The Coca-Cola Co Occupation HR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129503
Amount of Each Receipt this Period 25.00

c. Dr. Margaret H Schadler Ph.D.
Full Name (Last, First, Middle Initial)
Mailing Address 4024 Windsor Drive
City Niskayuna State NE Zip Code 12309
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 ▼ 1400.00

Date of Receipt 12 / 16 / 2011
Transaction ID : 3130964
Amount of Each Receipt this Period 1000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1240.00 |
| 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 643 OF 2452 |
| | <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. Helen S Schaefer | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 10 / 2011 Transaction ID : 3125693 |
| Mailing Address 11701 E Andalusian Pl | | Amount of Each Receipt this Period 250.00 |
| City Tucson | State AZ | Zip Code 85748 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer n/a | Occupation retired educator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1250.00 | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Ann C Schaffner | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 18 / 2011 Transaction ID : 3131093 |
| Mailing Address Apt 418 20 Watertown St. Unit One | | Amount of Each Receipt this Period 100.00 |
| City Watertown | State MA | Zip Code 02472 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer Franklin W. Olin College of Engineerin | Occupation College Administrator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1200.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Christine D. Schaffran | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 20 / 2011 Transaction ID : 3133363 |
| Mailing Address 185 Hall St., Apt. 211 | | Amount of Each Receipt this Period 80.00 |
| City Brooklyn | State NY | Zip Code 11205 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer NYS Psych Inst | Occupation Research Scientist | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 205.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 430.00 |
| 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 644 OF 2452 |
| | <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. Grace B. Schaible | | | Date of Receipt |
| Mailing Address PO Box 61560 | | | <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3133346 |
| Fairbanks | AK | 99706 | 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 | | |
| n/a | Retired | | |
| 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. Ms. Karen Schaufeld | | | Date of Receipt |
| Mailing Address 16140 River Farm Ln. | | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3134781 |
| Leesburg | VA | 20176 | 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 | Homemaker | | |
| 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. Mrs. Carol Schectman | | | Date of Receipt |
| Mailing Address 18601 NE 14th Ave Apt 312 | | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3135947 |
| North Miami Beach | FL | 33179 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="20.00"/> |
| Name of Employer | Occupation | | |
| n/a | Retired | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="240.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="1270.00"/> |
| 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 645 OF 2452 |
| | <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. 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 ▼ 1150.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3139007

Amount of Each Receipt this Period
 250.00

B. Ms. Rosels Schewel
Full Name (Last, First, Middle Initial)

Mailing Address 127 Westminster Way

City Lynchburg State VA Zip Code 24503

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 ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133354

Amount of Each Receipt this Period
 55.00

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

Mailing Address 616 W. Belden

City Chicago State IL Zip Code 60614

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

Name of Employer Weigel Occupation Business

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011
Transaction ID : 3120934

Amount of Each Receipt this Period
 50.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 355.00 |
| 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 646 OF 2452
(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. Anne P. Schmalz

Mailing Address 22 Ashland Street
#509

City State Zip Code
Dorchester MA 02122

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 ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011
Transaction ID : 3128499

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Ms. Rosemary T Schmidt

Mailing Address 214 Loma Avenue
90803

City State Zip Code
Long Beach CA 90803

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 ▼
510.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 06 / 2011
Transaction ID : 3122744

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
C. Ms. Anne W. Schmidt

Mailing Address 450 Noank Rd.

City State Zip Code
Mystic CT 06355

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
12 / 27 / 2011
Transaction ID : 3134539

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

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 647 OF 2452
(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. Boynton M. Schmitt
 Mailing Address 225 Dromara Road
 City State Zip Code
 Guilford CT 06437
 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 ▼
 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129258
 Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. Ms. Mary C. Schmitt
 Mailing Address 5121 Pinyon Drive
 City State Zip Code
 Littleton CO 80123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 University of Colorado Pediatrician
 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
 12 / 27 / 2011
Transaction ID : 3134590
 Amount of Each Receipt this Period
 1000.00

Full Name (Last, First, Middle Initial)
C. Mrs. Christina R. Schmitz
 Mailing Address 28514 Coveridge Drive
 City State Zip Code
 Rancho Palos Verdes CA 90275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 none mom
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129367
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1070.00
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 648 OF 2452
(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. Erin Schnabel
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 Pasture Lane
 City Poughkeepsie State NY Zip Code 12603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 IBM Software Engineer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 12 / 01 / 2011
Transaction ID : 3119437
 Amount of Each Receipt this Period
 50.00

B. Erin Schnabel
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 Pasture Lane
 City Poughkeepsie State NY Zip Code 12603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 IBM Software Engineer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3129614
 Amount of Each Receipt this Period
 10.00

C. Erin Schnabel
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 Pasture Lane
 City Poughkeepsie State NY Zip Code 12603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 IBM Software Engineer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 12 / 30 / 2011
Transaction ID : 3138645
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 649 OF 2452 |
| | <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. Helen Schneeberg | | Date of Receipt |
| Mailing Address 2180 Post St. #321 | | M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2011 |
| City | State | Zip Code |
| San Francisco | CA | 94115 |
| FEC ID number of contributing federal political committee. C | | Transaction ID : 3130641 |
| Name of Employer Retired, Phila School District | | Amount of Each Receipt this Period |
| Occupation retired/research lan | | 50.00 |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | |
| <input type="checkbox"/> Other (specify) ▼ | 305.00 | |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. sandy P. Schneider | | Date of Receipt |
| Mailing Address 11700 old georgetown road #150 | | M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| City | State | Zip Code |
| Rockville | MD | 20852 |
| FEC ID number of contributing federal political committee. C | | Transaction ID : 3128652 |
| Name of Employer self | | Amount of Each Receipt this Period |
| Occupation self | | 249.00 |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | |
| <input type="checkbox"/> Other (specify) ▼ | 249.00 | |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Pauline P. Schneider | | Date of Receipt |
| Mailing Address 19 South Rd | | M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| City | State | Zip Code |
| Katonah | NY | 10536 |
| FEC ID number of contributing federal political committee. C | | Transaction ID : 3129186 |
| Name of Employer Unemployed | | Amount of Each Receipt this Period |
| Occupation Teacher | | 25.00 |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | |
| <input type="checkbox"/> Other (specify) ▼ | 300.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 324.00 |
| 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 650 OF 2452 |
| | <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. S L L. Schnur
Full Name (Last, First, Middle Initial)

Mailing Address 6009 Lincolnwood Ct

City State Zip Code
Burke VA 22015

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

Name of Employer Occupation
Concepts Unlimited President

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
12 / 08 / 2011

Transaction ID : 3124731

Amount of Each Receipt this Period
50.00

B. Ms. Alice Schonberg
Full Name (Last, First, Middle Initial)

Mailing Address 6190 Island Walk, Apt. D

City State Zip Code
Boca Raton FL 33496

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 ▼
340.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : 3132153

Amount of Each Receipt this Period
140.00

C. Mr. Robert H. Schor
Full Name (Last, First, Middle Initial)

Mailing Address 10 Ambassador Drive

City State Zip Code
Rochester NY 14610

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

Name of Employer Occupation
University of Pittsburgh Faculty

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : 3128577

Amount of Each Receipt this Period
20.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 210.00 |
| 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 651 OF 2452 |
| | <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. John E Schowalter | | Date of Receipt 12 / 12 / 2011 Transaction ID : 3126173 |
| Mailing Address 256 Ives Street | | Amount of Each Receipt this Period 100.00 |
| City Hamden | State CT | Zip Code 06518 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 400.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Angeline Faye Faye Schrater | | Date of Receipt 12 / 15 / 2011 Transaction ID : 3129114 |
| Mailing Address 575 E 8TH St | | Amount of Each Receipt this Period 15.00 |
| City Durango | State CO | Zip Code 81301 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 15.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 280.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Stephanie Schriock | | Date of Receipt 12 / 20 / 2011 Transaction ID : 3133014 |
| Mailing Address 3225 Valley Drive | | Amount of Each Receipt this Period 100.00 |
| City Alexandria | State VA | Zip Code 22302 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer EMILY's List | Occupation President | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1100.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 215.00 |
| 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 652 OF 2452 |
| | <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. Sally Schroeder
Full Name (Last, First, Middle Initial)

Mailing Address 10 Paseo Mirasol

| | | |
|---------------------------|-------------|-------------------|
| City Belvedere Tiburon | State CA | Zip Code 94920 |
|---------------------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3134684

Amount of Each Receipt this Period
250.00

B. Mr. Stanley Schroeder
Full Name (Last, First, Middle Initial)

Mailing Address 572 Wapiti Loop

| | | |
|------------------|-------------|-------------------|
| City Hamilton | State MT | Zip Code 59840 |
|------------------|-------------|-------------------|

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 ▼
1020.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3131024

Amount of Each Receipt this Period
85.00

C. Dr. Faye Schuett
Full Name (Last, First, Middle Initial)

Mailing Address 23211 Cass Ave

| | | |
|--------------------|-------------|-------------------|
| City Farmington | State MI | Zip Code 48335 |
|--------------------|-------------|-------------------|

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

| | |
|---|-------------------------|
| Name of Employer Schoolcraft College | Occupation Professor |
|---|-------------------------|

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128592

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 435.00 |
| 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 653 OF 2452 |
| | <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. Elsa N. Schultz | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2011 |
| Mailing Address 50 Coe Rd., Apt. 111 | | Transaction ID : 3135127 |
| City Belleair | State FL | Zip Code 33756 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 3550.00 | |
| | | Amount of Each Receipt this Period 250.00 |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr. John Schultz | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2011 |
| Mailing Address 2730 S Eagle Court | | Transaction ID : 3121768 |
| City Columbia | State MO | Zip Code 65201 |
| 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 ▼ 300.00 | |
| | | Amount of Each Receipt this Period 300.00 |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Mr. John W. Schumann | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 |
| Mailing Address 3025 NE 34th Ave | | Transaction ID : 3125798 |
| City Portland | State OR | Zip Code 97212 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer LTK Engineering Services | Occupation Transport Consultant | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1100.00 | |
| | | Amount of Each Receipt this Period 40.00 |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 590.00 |
| 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 654 OF 2452 |
| | <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. Lorraine Schwarm | | Date of Receipt |
| Mailing Address 4036 Evanston Ave. N | | <input type="text" value="12"/> / <input type="text" value="17"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Seattle | WA | 98103 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3131110 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="25.00"/> |
| Name of Employer | Occupation | |
| Seattle Public Schools | substitute | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="275.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Mr. Ronald Schwartz | | Date of Receipt |
| Mailing Address 7710 Woodmont Ave., Apt. 602 | | <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Bethesda | MD | 20814 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3133439 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <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) C. Dr. Janet H. Schwartz | | Date of Receipt |
| Mailing Address 3875 Maulfair Dr. | | <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Allentown | PA | 18103 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3127876 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="100.00"/> |
| Name of Employer | Occupation | |
| self | psychiatrist | |
| 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="375.00"/> |
| 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 655 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Ms. Mary Ann Schwarzbach | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2011 |
| Mailing Address 1620 Pankow Dr | | Transaction ID : 3123681 |
| City Geneva | State IL | Zip Code 60134 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 3450.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Mary Ann Schwarzbach | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 14 / 2011 |
| Mailing Address 1620 Pankow Dr | | Transaction ID : 3128057 |
| City Geneva | State IL | Zip Code 60134 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 3450.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Edith Schwede | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2011 |
| Mailing Address 12520 Edgewater Drive, #907 | | Transaction ID : 3124719 |
| City Lakewood | State OH | Zip Code 44107 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| 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 ▼ 505.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1125.00 |
| 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 656 OF 2452 |
| | <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. Hugo Schwyzer | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 22 / 2011 |
| Mailing Address 1118 South Wetherly Drive | | Transaction ID : 3134226 |
| City Los Angeles | State CA | Zip Code 90035 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500.00 | |
| Name of Employer Pasadena City College | Occupation professor | |
| 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) B. Ms. Laura J. Scott | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2011 |
| Mailing Address 1031 Forest Lakes Drive | | Transaction ID : 3130648 |
| City Naples | State FL | Zip Code 34105 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 1000.00 | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 3000.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) c. Mrs. Mary Hugh Scott | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address PO Box A | | Transaction ID : 3134393 |
| City Aspen | State CO | Zip Code 81612 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 2000.00 | |
| Name of Employer N/A | Occupation Grandmother | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2000.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3050.00 |
| 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 657 OF 2452 |
| | <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. Judith G Scott
Full Name (Last, First, Middle Initial)
Mailing Address 3501 N. Summit Ave.
City Shorewood State WI Zip Code 53211
FEC ID number of contributing federal political committee. **C**
Name of Employer Robert W. Baird & Co. Inc. Occupation Investment Banking
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **12 / 15 / 2011**
Transaction ID : 3129058
Amount of Each Receipt this Period **50.00**

B. Judy Seabridge
Full Name (Last, First, Middle Initial)
Mailing Address 309 Gethsemane St
City Nevada City State CA Zip Code 95959
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 **425.00**

Date of Receipt **12 / 09 / 2011**
Transaction ID : 3126072
Amount of Each Receipt this Period **35.00**

C. Michael Seaman
Full Name (Last, First, Middle Initial)
Mailing Address 33 Priscilla Ln
City Schenectady State NY Zip Code 12306
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 **222.00**

Date of Receipt **12 / 31 / 2011**
Transaction ID : 3139195
Amount of Each Receipt this Period **15.00**

SUBTOTAL of Receipts This Page (optional)..... **100.00**
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 658 OF 2452 |
| | (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. Tracy Seff
Full Name (Last, First, Middle Initial)
Mailing Address 2100 12th St NW
City Washington State DC Zip Code 20009
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-employed Occupation Self-employed
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt
12 / 05 / 2011
Transaction ID : 3120947
Amount of Each Receipt this Period
500.00

B. Ms. Lois Seglem
Full Name (Last, First, Middle Initial)
Mailing Address 23450 Dunstan Avenue
City Port Charlotte State FL Zip Code 33954
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation RETIRED NEX
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt
12 / 11 / 2011
Transaction ID : 3125999
Amount of Each Receipt this Period
10.00

C. Ms. Twila Seibert
Full Name (Last, First, Middle Initial)
Mailing Address 322 N. 4th Avenue
City Winterset State IA Zip Code 50273
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 **343.75**

Date of Receipt
12 / 31 / 2011
Transaction ID : 3139189
Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... **520.00**
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 659 OF 2452 |
| | <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 Seid
Full Name (Last, First, Middle Initial)
Mailing Address 950 N Michigan Ave., Apt. 4102
4102
City Chicago State IL Zip Code 60611
FEC ID number of contributing federal political committee. **C**
Name of Employer The Art Institute of Chicago Occupation Research Associate
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 27 / 2011
Transaction ID : 3134679
Amount of Each Receipt this Period
250.00

B. Ms. Susan Seidel
Full Name (Last, First, Middle Initial)
Mailing Address 425 East 63rd St
City New York State NY Zip Code 10065
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Art Dealer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 19 / 2011
Transaction ID : 3132442
Amount of Each Receipt this Period
100.00

C. Ms. Jean Seiden
Full Name (Last, First, Middle Initial)
Mailing Address 11100 Rosemont Dr.
City North Bethesda State MD Zip Code 20852
FEC ID number of contributing federal political committee. **C**
Name of Employer Spectra Design Group LTD Occupation Interior Designer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 14 / 2011
Transaction ID : 3128071
Amount of Each Receipt this Period
200.00

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 660 OF 2452 |
| | <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. Ms. Cecily Selby | | Date of Receipt 12 / 17 / 2011 Transaction ID : 3130998 |
| Mailing Address 1 east 66 Street | | Amount of Each Receipt this Period 150.00 |
| City New York | State NY | Zip Code 10065 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer NA | Occupation retired academic | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr. J William William Semich | | Date of Receipt 12 / 31 / 2011 Transaction ID : 3139213 |
| Mailing Address 326 Lincoln Road Apt. 224 | | Amount of Each Receipt this Period 150.00 |
| City Miami | State FL | Zip Code 33139 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer WorldNames, Inc | Occupation Manager | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1650.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Judith Senderowitz | | Date of Receipt 12 / 19 / 2011 Transaction ID : 3132200 |
| Mailing Address 101 W 90th St Apt. 18D | | Amount of Each Receipt this Period 50.00 |
| City New York | State NY | Zip Code 10024 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer SELF | Occupation INT'L HEALTH CONSULT | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 254.40 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 350.00 |
| 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 661 OF 2452 |
| | <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. Virginia L. Senders
 Full Name (Last, First, Middle Initial)
 Mailing Address 305 Spencer Dr.
 City Amherst State MA Zip Code 01002
 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 ▼ 364.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3139008
 Amount of Each Receipt this Period
 33.00

B. Ms. Peg Senturia
 Full Name (Last, First, Middle Initial)
 Mailing Address 98 Crowninshield Rd.
 City Brookline State MA Zip Code 02446
 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 ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3135126
 Amount of Each Receipt this Period
 1000.00

C. Ms. Diane Serber
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Cotter Rd
 City Old Chatham State NY Zip Code 12136
 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 ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2011
Transaction ID : 3135554
 Amount of Each Receipt this Period
 20.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1053.00 |
| 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 662 OF 2452 |
| | <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. Dean Sereni
Full Name (Last, First, Middle Initial)
Mailing Address 733 Front St Apt 605

| | | |
|-----------------------|-------------|-------------------|
| City San Francisco | State CA | Zip Code 94111 |
|-----------------------|-------------|-------------------|

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 ▼
265.80

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 06 | / | 2011 |

Transaction ID : 3121925

Amount of Each Receipt this Period
112.00

B. Ms. Alice Lewis Sessions
Full Name (Last, First, Middle Initial)
Mailing Address 3920 Argyle Ter NW

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20011 |
|--------------------|-------------|-------------------|

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 ▼
465.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2011 |

Transaction ID : 3133255

Amount of Each Receipt this Period
30.00

C. Ms. Martha E. Sessums
Full Name (Last, First, Middle Initial)
Mailing Address 544 Palm Ave

| | | |
|-------------------|-------------|-------------------|
| City Los Altos | State CA | Zip Code 94022 |
|-------------------|-------------|-------------------|

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

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 14 | / | 2011 |

Transaction ID : 3128136

Amount of Each Receipt this Period
250.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 392.00 |
| 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 663 OF 2452 |
| | <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. Gail M. Shackel | | Date of Receipt |
| Mailing Address 3211 Point White | | <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Bainbridge Island | WA | 98110 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3139065 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="100.00"/> |
| Name of Employer | Occupation | |
| n/a | 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) B. Mrs. Olivia Shaffer | | Date of Receipt |
| Mailing Address 305 Wellington C | | <input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| West Palm Beach | FL | 33417 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3137424 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="25.00"/> |
| Name of Employer | Occupation | |
| n/a | Retired | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="350.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ruth Shaffer | | Date of Receipt |
| Mailing Address 39 Circle Dr. | | <input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| York | PA | 17402 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3133683 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="800.00"/> |
| Name of Employer | Occupation | |
| N/A | Ret. Educator | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="1250.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="925.00"/> |
| 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 664 OF 2452 |
| | <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. Heather J. Shaffer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1441 Rhode Island Ave NW #908
 City Washington State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129506
 Amount of Each Receipt this Period
 200.00

B. Ms. Gail Shamberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 5621 McAdoo Avenue
 City Sacramento State CA Zip Code 95819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U.C.Davis Health Occupation R.N.
 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
 12 / 15 / 2011
Transaction ID : 3129377
 Amount of Each Receipt this Period
 25.00

C. Ms. Shelley Shanaman
 Full Name (Last, First, Middle Initial)
 Mailing Address 2936 Waterleaf Drive
 City Germantown State TN Zip Code 38138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131068
 Amount of Each Receipt this Period
 250.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 295.00 |
| 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 665 OF 2452 |
| | <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 E. Shannon
 Full Name (Last, First, Middle Initial)
 Mailing Address 1010 Waltham St., Apt. 397
 Apt. 397
 City Lexington State MA Zip Code 02421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation Homemaker
 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
 12 / 19 / 2011
Transaction ID : 3131844
 Amount of Each Receipt this Period
500.00

B. Ms. Arlene Shapiro
 Full Name (Last, First, Middle Initial)
 Mailing Address 2375 Turnberry Court
 City Naples State FL Zip Code 34109
 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 **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133020
 Amount of Each Receipt this Period
100.00

C. Dr. Susan E Shapiro
 Full Name (Last, First, Middle Initial)
 Mailing Address 565 Peachtree Street NE
 City Atlanta State GA Zip Code 30308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Emory Healthcare Occupation nurse
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1050.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2011
Transaction ID : 3135591
 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 666 OF 2452 |
| | <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

A. Ms. Rachel Shapiro
Full Name (Last, First, Middle Initial)
Mailing Address 886 S Jersey St
City Denver State CO Zip Code 80224
FEC ID number of contributing federal political committee. **C**
Name of Employer Project PAVE Occupation CFO
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 12 / 31 / 2011
Transaction ID : 3139009
Amount of Each Receipt this Period 250.00

B. Ms. Judith Shapiro
Full Name (Last, First, Middle Initial)
Mailing Address 454 Riverside Dr., Apt. 2B
City New York State NY Zip Code 10027
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 12 / 27 / 2011
Transaction ID : 3134822
Amount of Each Receipt this Period 50.00

C. Ms. Margaret P. Sharp
Full Name (Last, First, Middle Initial)
Mailing Address 1218 Knolwood Place
City Martinsville State VA Zip Code 24112
FEC ID number of contributing federal political committee. **C**
Name of Employer Carlisle School Occupation Teacher
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 275.00

Date of Receipt 12 / 20 / 2011
Transaction ID : 3133210
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 667 OF 2452 |
| | <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. Rhonna Shatz | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 3129425 |
| Mailing Address 5453 Pond Bluff Court | | Amount of Each Receipt this Period 30.00 |
| City West Bloomfield | State MI | Zip Code 48323 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Henry Ford Hospital | Occupation Neurologist | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 360.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Mary Frances Shaughnessy | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 19 / 2011 Transaction ID : 3132300 |
| Mailing Address 357 Spillway Road | | Amount of Each Receipt this Period 250.00 |
| City West Hurley | State NY | Zip Code 12491 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Tudor Realty Services Corp. | Occupation Real Estate Executiv | |
| 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. Donna Shelton | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 3128615 |
| Mailing Address 10005 Donal Ln | | Amount of Each Receipt this Period 25.00 |
| City Vienna | State VA | Zip Code 22181 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Lockheed Martin Corp. | Occupation Executive | |
| 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).....▶ | 305.00 |
| 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 668 OF 2452 |
| | <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. Elisha A. Shephard
Full Name (Last, First, Middle Initial)
Mailing Address 225 Little Vine Road
City Bremen State GA Zip Code 30110
FEC ID number of contributing federal political committee. **C**
Name of Employer Kimberly-Clark Corp. Occupation Scientist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129241
Amount of Each Receipt this Period 200.00

B. Anthony Shepherd
Full Name (Last, First, Middle Initial)
Mailing Address 165 East 32nd Street Apt 6E
City New York State NY Zip Code 10016
FEC ID number of contributing federal political committee. **C**
Name of Employer Protravel Occupation travel agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 13 / 2011
Transaction ID : 3126477
Amount of Each Receipt this Period 300.00

C. Mrs. Isabel B. Sherdon
Full Name (Last, First, Middle Initial)
Mailing Address 2419 Chestnut View Dr.
City Lancaster State PA Zip Code 17603
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 ▼ 475.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3132178
Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 395.00
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 669 OF 2452 |
| | <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. Joan D. Sherizen
Full Name (Last, First, Middle Initial)
Mailing Address 5 Keane Ter
City Natick State MA Zip Code 01760
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 ▼ 288.00

Date of Receipt 12 / 02 / 2011
Transaction ID : 3119989
Amount of Each Receipt this Period 18.00

B. Ms. Joan D. Sherizen
Full Name (Last, First, Middle Initial)
Mailing Address 5 Keane Ter
City Natick State MA Zip Code 01760
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 ▼ 288.00

Date of Receipt 12 / 29 / 2011
Transaction ID : 3138306
Amount of Each Receipt this Period 18.00

C. Derin Sherman
Full Name (Last, First, Middle Initial)
Mailing Address 3209 12Th Ave Se
City Cedar Rapids State IA Zip Code 52403
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 ▼ 242.11

Date of Receipt 12 / 08 / 2011
Transaction ID : 3124946
Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 76.00
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 670 OF 2452
(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. Alan Shestack
 Full Name (Last, First, Middle Initial)
 Mailing Address 4912 Tilden St., NW
 City Washington State DC Zip Code 20016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Gallery of Art Occupation retired museum admin
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011
Transaction ID : 3133904
 Amount of Each Receipt this Period
 100.00

B. Mr. Alan M. Shiller
 Full Name (Last, First, Middle Initial)
 Mailing Address 60218 Fenner Rd
 City Slidell State LA Zip Code 70460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U So. MS Occupation Professor
 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
 12 / 02 / 2011
Transaction ID : 3119659
 Amount of Each Receipt this Period
 300.00

C. Ms. Carolyn L Shine
 Full Name (Last, First, Middle Initial)
 Mailing Address 902B West 18th St.
 City Austin State TX Zip Code 78701
 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 ▼ 1901.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2011
Transaction ID : 3119838
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
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 671 OF 2452
(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. Carolyn L Shine
 Full Name (Last, First, Middle Initial)
 Mailing Address 902B West 18th St.
 City Austin State TX Zip Code 78701
 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 ▼ 1901.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128044
 Amount of Each Receipt this Period
 83.34

B. Ms. Barbara L. Short
 Full Name (Last, First, Middle Initial)
 Mailing Address 3550 SW Bond Ave., Unit 1208
 City Portland State OR Zip Code 97239
 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 ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131488
 Amount of Each Receipt this Period
 125.00

C. Ms. Joanna Shulman
 Full Name (Last, First, Middle Initial)
 Mailing Address 240 West 98TH Street, # 10H
 City New York State NY Zip Code 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mount Sinai Medical Center Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128545
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 238.34
TOTAL This Period (last page this line 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 672 OF 2452 |
| | <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. Greg Shutske
Full Name (Last, First, Middle Initial)

Mailing Address 3 Dark Hollow Ln.

| | | |
|-------------------|-------------|-------------------|
| City Pittstown | State NJ | Zip Code 08867 |
|-------------------|-------------|-------------------|

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 ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011

Transaction ID : 3134228

Amount of Each Receipt this Period
125.00

B. Ms. Martha Siebe
Full Name (Last, First, Middle Initial)

Mailing Address 8700 Solar Dr.

| | | |
|-------------------|-------------|-------------------|
| City Anchorage | State AK | Zip Code 99507 |
|-------------------|-------------|-------------------|

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

| | |
|--------------------------------------|---------------------------|
| Name of Employer University of ID | Occupation interviewer |
|--------------------------------------|---------------------------|

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
 12 / 28 / 2011

Transaction ID : 3135221

Amount of Each Receipt this Period
75.00

C. Ms. Shirley C. Siegel
Full Name (Last, First, Middle Initial)

Mailing Address 443 Cedar Club Cir.

| | | |
|---------------------|-------------|-------------------|
| City Chapel Hill | State NC | Zip Code 27517 |
|---------------------|-------------|-------------------|

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 ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3133489

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 300.00 |
| 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 673 OF 2452 |
| | <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. Jeannine Bouillier Siegmond | | Date of Receipt |
| Mailing Address 2266 Cherry Hill Road | | <input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Palmerton | PA | 18071 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3125398 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| n/a | Retired | <input type="text" value="100.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="520.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Jeannine Bouillier Siegmond | | Date of Receipt |
| Mailing Address 2266 Cherry Hill Road | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Palmerton | PA | 18071 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3128533 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| n/a | Retired | <input type="text" value="35.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="520.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Mary Sievert | | Date of Receipt |
| Mailing Address 2510 E. Roosevelt Road | | <input type="text" value="12"/> / <input type="text" value="24"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Ashley | MI | 48806 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3135691 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| n/a | Retired | <input type="text" value="38.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="346.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="173.00"/> |
| 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 674 OF 2452 |
| | <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. Don Sievert
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 Edgewood Ave
 City Columbia State MO Zip Code 65203
 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
 12 / 13 / 2011
Transaction ID : 3126354
 Amount of Each Receipt this Period
 200.00

B. Ms. Heather Sigworth
 Full Name (Last, First, Middle Initial)
 Mailing Address 4236 W Camino Pintoresco
 City Tucson State AZ Zip Code 85745
 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
 12 / 05 / 2011
Transaction ID : 3121221
 Amount of Each Receipt this Period
 500.00

C. Ms. Barbara S Silverstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 S. 15th St.
 City Philadelphia State PA Zip Code 19146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artistic Producer
 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
 12 / 22 / 2011
Transaction ID : 3134229
 Amount of Each Receipt this Period
 250.00

| | |
|--|--------|
| 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 675 OF 2452 |
| | <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 Simms
Full Name (Last, First, Middle Initial)
Mailing Address 219 North Avenue East

| | | |
|------------------|-------------|-------------------|
| City Missoula | State MT | Zip Code 59801 |
|------------------|-------------|-------------------|

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 ▼
240.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 22 | / | 2011 |

Transaction ID : 3134274

Amount of Each Receipt this Period
200.00

B. Ms. Diana Simon
Full Name (Last, First, Middle Initial)
Mailing Address 55 E Erie St., Apt. 4505

| | | |
|-----------------|-------------|-------------------|
| City Chicago | State IL | Zip Code 60611 |
|-----------------|-------------|-------------------|

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 ▼
3000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 28 | / | 2011 |

Transaction ID : 3135184

Amount of Each Receipt this Period
1000.00

C. Mr. Justin Simon M.D.
Full Name (Last, First, Middle Initial)
Mailing Address 3001 dana

| | | |
|------------------|-------------|-------------------|
| City Berkeley | State CA | Zip Code 94705 |
|------------------|-------------|-------------------|

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

| | |
|--------------------------|--------------------|
| Name of Employer Self | Occupation m.d. |
|--------------------------|--------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : 3119321

Amount of Each Receipt this Period
250.00

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1270.00 |
| 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 676 OF 2452 |
| | <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. Peggy Simonsen
Full Name (Last, First, Middle Initial)
Mailing Address 488 W Center RD
City Palatine State IL Zip Code 60074
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 **400.00**

Date of Receipt
12 / 14 / 2011
Transaction ID : 3127199
Amount of Each Receipt this Period
100.00

B. Dr. Elizabeth L. Simpson
Full Name (Last, First, Middle Initial)
Mailing Address 14500 Fruitvale Avenue Apt. 42
City Saratoga State CA Zip Code 95070
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 **300.00**

Date of Receipt
12 / 15 / 2011
Transaction ID : 3128860
Amount of Each Receipt this Period
25.00

C. Ms. Vickie Simpson
Full Name (Last, First, Middle Initial)
Mailing Address 585 Juneau Dr SE
City Salem State OR Zip Code 97302
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 **275.00**

Date of Receipt
12 / 16 / 2011
Transaction ID : 3131276
Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... **140.00**
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 677 OF 2452 |
| | <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. Nancy Sinatra

Mailing Address 8571 W. Olympic Blvd.

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Los Angeles | CA | 90035 |

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

| | |
|------------------|-------------|
| Name of Employer | Occupation |
| memebr # 81403 | entertainer |

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
 12 / 14 / 2011
Transaction ID : 3127898

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Mr. Karl Singer

Mailing Address 10 Hobbs Road

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Kensington | NH | 03833 |

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
| core | physician |

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
 12 / 04 / 2011
Transaction ID : 3119914

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Mrs. Mary E. Sinnott

Mailing Address 77 Old Logging Road

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Bedford | NY | 10506 |

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 ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3125230

Amount of Each Receipt this Period
2000.00

| | |
|--|---------|
| 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 678 OF 2452 |
| | <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. Siteman | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2011 |
| Mailing Address 11 Terry Hill Lane | | Transaction ID : 3126981 |
| City St. Louis | State MO | Zip Code 63131 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 5000.00 |
| Name of Employer Self | Occupation Homemaker | |
| 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) B. Ms. Elizabeth L L. Sjoberg | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 203 Pine Shadows Drive | | Transaction ID : 3129128 |
| City Seabrook | State TX | Zip Code 77586 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| Name of Employer REQUESTED | Occupation Homemaker | |
| 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. Ms. Anne Skinner | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2011 |
| Mailing Address Box 353 | | Transaction ID : 3133134 |
| City Williamstown | State MA | Zip Code 01267 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer n/a | 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).....▶ | 5275.00 |
| 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 679 OF 2452 |
| | <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. Jane A Slack | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2011 |
| Mailing Address 7247 San Luis | | Transaction ID : 3124566 |
| City Carlsbad | State CA | Zip Code 92011 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 150.00 |
| Name of Employer n/a | Occupation retired | |
| 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. Mr. Stephen Sleigh | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 11 / 2011 |
| Mailing Address 7301 Lynnhurst St | | Transaction ID : 3125925 |
| City Chevy Chase | State MD | Zip Code 20815 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 30.00 |
| Name of Employer IAM NPF | Occupation Executive | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. K. Sloan | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 |
| Mailing Address 540 Elmwood Rd | | Transaction ID : 3135730 |
| City Bay Village | State OH | Zip Code 44140 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 30.00 |
| 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 ▼ 330.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 210.00 |
| 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 681 OF 2452
(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. Chris Smeloff

Mailing Address 68 Riverknoll Place

City Carmichael State CA Zip Code 95608

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

Name of Employer Catholic Healthcare West Occupation Clinical Lab Scienti

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
 12 / 02 / 2011
Transaction ID : 3119950

Amount of Each Receipt this Period
200.00

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

Mailing Address 117 Sutherland Road

City Brighton State MA Zip Code 02135

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 ▼ **235.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3137067

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
C. Mr. James Smith

Mailing Address 12018 Navy St.

City Los Angeles State CA Zip Code 90066

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 ▼ **270.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2011
Transaction ID : 3130675

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **280.00**

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 682 OF 2452 |
| | <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. Donna M. Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 2933 North Hackett Avenue
 City Milwaukee State WI Zip Code 53211
 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 ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 25 / 2011
Transaction ID : 3135634
 Amount of Each Receipt this Period
 30.00

B. Ms. Audrey Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 408 Eskaton Cir
 City Grass Valley State CA Zip Code 95945
 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 ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129226
 Amount of Each Receipt this Period
 30.00

C. Hoyt Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 3579 SE Gull Ln
 City Stuart State FL Zip Code 34997
 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 ▼ 381.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133527
 Amount of Each Receipt this Period
 50.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 110.00 |
| 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 683 OF 2452 |
| | <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. Amanda J. Smith

Mailing Address 103 w main st #302
Unit 302/402

City Durham State NC Zip Code 27701

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 ▼
1000.00

Date of Receipt
12 / 14 / 2011
Transaction ID : 3127905

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. Mr. William S. Smith

Mailing Address 1007 E. Capitol St SE

City Washington State DC Zip Code 20003

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

Name of Employer Cintas Public Affairs Occupation Political Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
12 / 09 / 2011
Transaction ID : 3126101

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Ms. Polly P Smith

Mailing Address 307 East 12th Street
Apt.4B

City New York City State NY Zip Code 10003

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

Name of Employer Freelance Occupation Costume Designer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 / 09 / 2011
Transaction ID : 3125766

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2025.00

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 684 OF 2452
(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. William Smith

Mailing Address 3630 S Hopper Ridge Road

City State Zip Code
Cincinnati OH 45255

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

Name of Employer Occupation
ILSCO Corp. product designer

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
12 / 15 / 2011

Transaction ID : 3129585

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Ms. Dorsi Smith

Mailing Address 5007 Saffron Court

City State Zip Code
Fort Collins CO 80525

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

Name of Employer Occupation
NEA Company Small Business Assistant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **204.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : 3129365

Amount of Each Receipt this Period
17.00

Full Name (Last, First, Middle Initial)
C. Ms. Jennifer J. Smith

Mailing Address 64 O. St.

City State Zip Code
Boston MA 02127

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

Name of Employer Occupation
Nokia user experience designer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : 3128649

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **72.00**

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 685 OF 2452
(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. Vicki L. Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 244 Sycamore Dr
 City State Zip Code
 State College PA 16801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Penn State Univ systems analyst
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133177
 Amount of Each Receipt this Period
 35.00

B. Ross Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 209 Webster Street
 City State Zip Code
 Palo Alto CA 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RADX Technologies, Inc. CEO
 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
 12 / 31 / 2011
Transaction ID : 3139018
 Amount of Each Receipt this Period
 1000.00

C. Miss Barbara Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 487 Coventry Ave
 City State Zip Code
 Utica NY 13502
 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 ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129161
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1070.00
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 686 OF 2452 |
| | <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. Darlene J. Smith | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2011 Transaction ID : 3124959 |
| Mailing Address 5817 Bellona Avenue | | Amount of Each Receipt this Period 40.00 |
| City Baltimore | State MD | Zip Code 21212 |
| FEC ID number of contributing federal political committee. C | Name of Employer REQUESTED | |
| Occupation REQUESTED | | Aggregate Year-to-Date ▼ 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-----------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Jeanne S. Smith | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 10 / 2011 Transaction ID : 3125831 |
| Mailing Address 541 Austin Street | | Amount of Each Receipt this Period 10.00 |
| City Greensburg | State PA | Zip Code 15601 |
| FEC ID number of contributing federal political committee. C | Name of Employer retired | |
| Occupation retired | | Aggregate Year-to-Date ▼ 225.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-----------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mr. Gerald Smith | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 Transaction ID : 3126051 |
| Mailing Address 11890 Milpinos Lane | | Amount of Each Receipt this Period 20.00 |
| City Willow Spring | State NC | Zip Code 27592 |
| FEC ID number of contributing federal political committee. C | Name of Employer retired | |
| Occupation retired | | Aggregate Year-to-Date ▼ 240.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 70.00 |
| 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 687 OF 2452 |
| | <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. Michael Smith
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 2222

City LaGrange State GA Zip Code 30241

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

Name of Employer self Occupation lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129610

Amount of Each Receipt this Period
45.00

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

Mailing Address 305 W. Fullerton Pkwy

City Chicago State IL Zip Code 60614

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

Name of Employer Self Occupation Consultant

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
 12 / 06 / 2011

Transaction ID : 3122614

Amount of Each Receipt this Period
50.00

C. Ms. Betty J. Smith
Full Name (Last, First, Middle Initial)

Mailing Address 49 Alpha Omega Rd., P. O. Box
PO Box 68

City New Waverly State TX Zip Code 77358

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

Name of Employer Self Occupation Rancher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **720.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3128524

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **155.00**

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 688 OF 2452 |
| | <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. Rosemary L. Smithson
Full Name (Last, First, Middle Initial)

Mailing Address 1321 Cibola Cir.

| | | |
|------------------|-------------|-------------------|
| City Santa Fe | State NM | Zip Code 87501 |
|------------------|-------------|-------------------|

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

| | |
|-----------------------------------|---------------------------|
| Name of Employer self employed | Occupation copy writer |
|-----------------------------------|---------------------------|

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 |
| 12 | / | 21 | / | 2011 |

Transaction ID : 3133628

Amount of Each Receipt this Period
125.00

B. Mr. William R Smythe
Full Name (Last, First, Middle Initial)

Mailing Address 6251 Meadow Run Ct.

| | | |
|------------------|-------------|-------------------|
| City Norcross | State GA | Zip Code 30092 |
|------------------|-------------|-------------------|

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 ▼
650.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 14 | / | 2011 |

Transaction ID : 3127911

Amount of Each Receipt this Period
200.00

C. Ms. Patricia Snead
Full Name (Last, First, Middle Initial)

Mailing Address 4148 Dietz Farm Circle, N.W.

| | | |
|---------------------|-------------|-------------------|
| City Albuquerque | State NM | Zip Code 87107 |
|---------------------|-------------|-------------------|

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

| | |
|--------------------------|---------------------------------|
| Name of Employer Self | Occupation Apartment Manager |
|--------------------------|---------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.12

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 13 | / | 2011 |

Transaction ID : 3126236

Amount of Each Receipt this Period
320.12

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 645.12 |
| 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 689 OF 2452 |
| | <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. Charlotte A. A. Snider
 Full Name (Last, First, Middle Initial)
 Mailing Address Apt.1 2645 Saklan Indian Dr.
 Apt. 1
 City Walnut Creek State CA Zip Code 94595
 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 **395.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : 3134260
 Amount of Each Receipt this Period
50.00

B. Ms. Ellen Snowber-Marini
 Full Name (Last, First, Middle Initial)
 Mailing Address 301 College Avenue
 City Rock Hill State SC Zip Code 29730
 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 **237.11**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2011
Transaction ID : 3135840
 Amount of Each Receipt this Period
30.00

C. Lillian Snyder
 Full Name (Last, First, Middle Initial)
 Mailing Address 161 Tierra Encantada
 City Corrales State NM Zip Code 87048
 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 M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3139019
 Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... **180.00**
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 690 OF 2452 |
| | <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. Maxine Snyder
Full Name (Last, First, Middle Initial)
Mailing Address 7280 Romero Dr
City La Jolla State CA Zip Code 92037
FEC ID number of contributing federal political committee. **C**
Name of Employer NA Occupation mom
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3128445
Amount of Each Receipt this Period
250.00

B. Ms. Nancy Snyder
Full Name (Last, First, Middle Initial)
Mailing Address 235 13th Ave. E, Apt. 201
City Seattle State WA Zip Code 98102
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 ▼ 228.00

Date of Receipt
12 / 13 / 2011
Transaction ID : 3126503
Amount of Each Receipt this Period
38.00

C. Ms. Nancy Snyder
Full Name (Last, First, Middle Initial)
Mailing Address 235 13th Ave. E, Apt. 201
City Seattle State WA Zip Code 98102
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 ▼ 228.00

Date of Receipt
12 / 18 / 2011
Transaction ID : 3131333
Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 318.00
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 691 OF 2452 |
| | <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. Dr. Jill Donnie Snyder
 Full Name (Last, First, Middle Initial)
 Mailing Address 12222 Forsythe Dr.
 City Austin State TX Zip Code 78759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation EDU
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134546
 Amount of Each Receipt this Period
 55.00

B. Dr. Louise L. Soe
 Full Name (Last, First, Middle Initial)
 Mailing Address 1882 Knoxville Avenue
 City Long Beach State CA Zip Code 90815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cal Poly Pomona Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129342
 Amount of Each Receipt this Period
 20.00

C. Ms. Hilda W Sokol
 Full Name (Last, First, Middle Initial)
 Mailing Address 80 Lyme road #1022
 City Hanover State NH Zip Code 03755
 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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : 3134267
 Amount of Each Receipt this Period
 25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 100.00 |
| 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 692 OF 2452 |
| | <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. Nancy Solana
Full Name (Last, First, Middle Initial)

Mailing Address 4429 San Carlos

City Dallas State TX Zip Code 75205

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

Name of Employer Bonanza Oil Co. Occupation Philantropy

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
 12 / 09 / 2011
Transaction ID : 3125709

Amount of Each Receipt this Period
 1000.00

B. Ms. Martha S. Solano
Full Name (Last, First, Middle Initial)

Mailing Address 4622 Citation Court

City Batavia State OH Zip Code 45103

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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128113

Amount of Each Receipt this Period
 100.00

C. Ms. Rachael Solem
Full Name (Last, First, Middle Initial)

Mailing Address 5 Bacon Street

City Wellesley State MA Zip Code 02482

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

Name of Employer Irving House Corporation Occupation Hotelier

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 740.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128669

Amount of Each Receipt this Period
 20.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1120.00 |
| 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 693 OF 2452 |
| | (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. Janet W. Solinger | | Date of Receipt |
| Mailing Address 2801 New Mexico Avenue, NW Apt. 707 | | <input type="text" value="12"/> / <input type="text" value="07"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Washington | DC | 20007 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3123331 |
| 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 | |
| n/a | retired | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="3750.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Dr. Alan M. Solinger | | Date of Receipt |
| Mailing Address 6895 Elverton Dr. | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Oakland | CA | 94611 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3134664 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="100.00"/> |
| Name of Employer | Occupation | |
| XOMA | Physician | |
| 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. Joseph R. Solmonese | | Date of Receipt |
| Mailing Address 1640 Rhode Island Avenue, NW | | <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Washington | DC | 20036 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3132440 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="100.00"/> |
| Name of Employer | Occupation | |
| Human Rights Campaign | President | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="900.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="1200.00"/> |
| 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 694 OF 2452 |
| | (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. Dr. Irwin Solomon M.D.
Full Name (Last, First, Middle Initial)
Mailing Address 1450 Post St., Apt. 915

| | | |
|-----------------------|-------------|-------------------|
| City San Francisco | State CA | Zip Code 94109 |
|-----------------------|-------------|-------------------|

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

| | |
|---|-------------------------|
| Name of Employer Natural Resources Defense Council | Occupation Physician |
|---|-------------------------|

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 |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3134633

Amount of Each Receipt this Period
200.00

B. Mrs. Sheila P. Sonenshine
Full Name (Last, First, Middle Initial)
Mailing Address 2437 Monaco Drive

| | | |
|----------------------|-------------|-------------------|
| City Laguna Beach | State CA | Zip Code 92651 |
|----------------------|-------------|-------------------|

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 |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3129926

Amount of Each Receipt this Period
300.00

C. Ms. Katarzyna Sornat
Full Name (Last, First, Middle Initial)
Mailing Address 102 Janwood Pl.

| | | |
|--------------------|-------------|-------------------|
| City Lewisville | State TX | Zip Code 75067 |
|--------------------|-------------|-------------------|

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 |
| 12 | / | 13 | / | 2011 |

Transaction ID : 3126777

Amount of Each Receipt this Period
25.00

| | |
|--|--------|
| 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 695 OF 2452 |
| | <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 Spack
Full Name (Last, First, Middle Initial)

Mailing Address 850 Powell St., Apt. 901
Apt. 901

City San Francisco State CA Zip Code 94108

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 ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2011

Transaction ID : 3131418

Amount of Each Receipt this Period
200.00

B. Ms. Ann W. Spaeth
Full Name (Last, First, Middle Initial)

Mailing Address 15 Laughlin Lane

City Philadelphia State PA Zip Code 19118

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

Name of Employer REQUESTED Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2011

Transaction ID : 3135946

Amount of Each Receipt this Period
40.00

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

Mailing Address 3920 Mystic Valley Pkwy #712

City Medford State MA Zip Code 02155

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

Name of Employer New England Law | Boston Occupation Professor of Law

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
12 / 19 / 2011

Transaction ID : 3132401

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00

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 696 OF 2452 |
| | (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. Gail Spane

Mailing Address 1101 G St. SE

City Washington State DC Zip Code 20003

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

Name of Employer Self Occupation TAX ADVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2011

Transaction ID : 3126221

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Mrs. Betty Sparks

Mailing Address P.O. Box 2017, 884 SW Wakeetum

City Waldport State OR Zip Code 97394

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 ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011

Transaction ID : 3125902

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Mr. Jim Speakman

Mailing Address 1025 43rd Street

City Sacramento State CA Zip Code 95819

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 ▼
380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 03 / 2011

Transaction ID : 3119813

Amount of Each Receipt this Period
30.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 255.00 |
| 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 697 OF 2452
(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. Sarah Speakman

Mailing Address 2214 Clay Street

City San Francisco State CA Zip Code 94115

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

Name of Employer Pacific Gas and Electric Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 18 / 2011
Transaction ID : 3131329

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Dr. Mary Helen Spear

Mailing Address 109 Ridge Road

City Greenbelt State MD Zip Code 20770

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

Name of Employer Prince George's Community Col Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128681

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
c. Dr. Robert J. Spear

Mailing Address 190 south shore rd

City Swanton State MD Zip Code 21561

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

Name of Employer Prince George's Community College Occupation professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128708

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **95.00**

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 698 OF 2452
(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. Robert J. Spear
 Full Name (Last, First, Middle Initial)
 Mailing Address 190 south shore rd
 City Swanton State MD Zip Code 21561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Prince George's Community College Occupation professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133151
 Amount of Each Receipt this Period
 25.00

B. Dr. Janet T. Spence
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 465
 City Dennis State MA Zip Code 02638
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131947
 Amount of Each Receipt this Period
 150.00

C. Ms. Mary Alice Spencer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 Senora Avenue
 City Billings State MT Zip Code 59105
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3127017
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 699 OF 2452 |
| | <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. Edith Prunty Spencer
Full Name (Last, First, Middle Initial)

Mailing Address 1801 Kenwood Ave

City State Zip Code
Flint MI 48503

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 ▼
375.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2011

Transaction ID : 3119687

Amount of Each Receipt this Period
250.00

B. Ms. Harriette LaVerre Spiegel
Full Name (Last, First, Middle Initial)

Mailing Address 1817 River Shores Dr

City State Zip Code
Knoxville TN 37914

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

Name of Employer Occupation
U. of TN Martin Instructional Specia

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : 3129577

Amount of Each Receipt this Period
40.00

C. Ms. Jocelyn Spielman
Full Name (Last, First, Middle Initial)

Mailing Address 1104 N. Quincy Street Unit F

City State Zip Code
Arlington VA 22201

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

Name of Employer Occupation
The Codmus Group Environmental Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : 3129122

Amount of Each Receipt this Period
20.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 310.00 |
| 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 700 OF 2452 |
| | <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 Spiewak
Full Name (Last, First, Middle Initial)
Mailing Address 7020 S. Forrest Side Road

| | | |
|-----------------|-------------|-------------------|
| City Brimley | State MI | Zip Code 49715 |
|-----------------|-------------|-------------------|

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

| | |
|---|---------------------------------|
| Name of Employer War Memorial Hospital | Occupation Histotechnologist |
|---|---------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129055

Amount of Each Receipt this Period
21.00

B. Ms. Roberta Spike
Full Name (Last, First, Middle Initial)
Mailing Address 920 Oxford Street

| | | |
|------------------|-------------|-------------------|
| City Berkeley | State CA | Zip Code 94707 |
|------------------|-------------|-------------------|

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 ▼
385.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129036

Amount of Each Receipt this Period
35.00

C. Mrs. Sydney B. Spofford
Full Name (Last, First, Middle Initial)
Mailing Address 1954 Michigan Ave.

| | | |
|--------------------|-------------|-------------------|
| City Marysville | State MI | Zip Code 48040 |
|--------------------|-------------|-------------------|

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 ▼
325.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3134416

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 156.00 |
| 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 701 OF 2452 |
| | <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. Dr. Lo Sprague
 Full Name (Last, First, Middle Initial)
 Mailing Address 146 South Beachwood Drive
 City Los Angeles State CA Zip Code 90004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Writer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **350.00**

Date of Receipt
 12 / 31 / 2011
Transaction ID : 3139020
 Amount of Each Receipt this Period
250.00

B. Ms. Eve Mo Stacey
 Full Name (Last, First, Middle Initial)
 Mailing Address 2409 Monroe St.
 City Columbia State SC Zip Code 29205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer S.C. Bar Occupation Assoc. Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **650.00**

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3129797
 Amount of Each Receipt this Period
100.00

C. Ms. Eve Mo Stacey
 Full Name (Last, First, Middle Initial)
 Mailing Address 2409 Monroe St.
 City Columbia State SC Zip Code 29205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer S.C. Bar Occupation Assoc. Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **650.00**

Date of Receipt
 12 / 28 / 2011
Transaction ID : 3135135
 Amount of Each Receipt this Period
200.00

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 702 OF 2452 |
| | <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 S. Stachelczyk
Full Name (Last, First, Middle Initial)

Mailing Address 23238 Holly Hill Lane

City California State MD Zip Code 20619

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
 12 / 15 / 2011

Transaction ID : 3129330

Amount of Each Receipt this Period
25.00

B. Ms. Beth Stafford
Full Name (Last, First, Middle Initial)

Mailing Address 3813 Farhills

City Champaign State IL Zip Code 61822

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 ▼ **645.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011

Transaction ID : 3130693

Amount of Each Receipt this Period
100.00

C. Ms. Beth Stafford
Full Name (Last, First, Middle Initial)

Mailing Address 3813 Farhills

City Champaign State IL Zip Code 61822

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 ▼ **645.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2011

Transaction ID : 3135563

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **175.00**

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 703 OF 2452 |
| | (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

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Dr. David G. Stahl D.M.D. | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2011 |
| Mailing Address 100 Magnolia Rd. | | Transaction ID : 3123370 |
| City Manchester | State NH | Zip Code 03104 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 375.83 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Ann Staley | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2011 |
| Mailing Address 227 Sw 8Th St | | Transaction ID : 3138314 |
| City Corvallis | State OR | Zip Code 97333 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 10.00 |
| Name of Employer self-employed | Occupation teacher, writer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 208.22 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Mr. Andrew Stancliffe | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2011 |
| Mailing Address 1145 Larrabee St Apt 12 | | Transaction ID : 3121624 |
| City West Hollywood | State CA | Zip Code 90069 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 93.75 |
| Name of Employer n/a | Occupation RETIRED | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 318.75 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 203.75 |
| TOTAL This Period (last page this line 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 704 OF 2452
(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 G. Stanton
 Full Name (Last, First, Middle Initial)
 Mailing Address 5909 Monticello Avenue
 City Cincinnati State OH Zip Code 45224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128957
 Amount of Each Receipt this Period
 200.00

B. Ms. Maureen L. Stanton
 Full Name (Last, First, Middle Initial)
 Mailing Address 4500 Capri Way
 City Sacramento State CA Zip Code 95822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of CA Davis Occupation university professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128258
 Amount of Each Receipt this Period
 200.00

C. Ms. Patricia Reilly Stark
 Full Name (Last, First, Middle Initial)
 Mailing Address 336 Mohawk Rd.
 City Santa Barbara State CA Zip Code 93109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer City of Santa Barbara Occupation Admin. Asst.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133388
 Amount of Each Receipt this Period
 140.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 360.00
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 705 OF 2452 |
| | <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. Stephanie D. Starrett | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2011 |
| Mailing Address 10801 Cogswell Place | | Transaction ID : 3131029 |
| City Fairfax Station | State VA | Zip Code 22039 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 300.00 | |
| Name of Employer n/a | Occupation retired | |
| 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) B. Ms. Naomi M. Stearns | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2011 |
| Mailing Address 38 Palmer Woods Drive | | Transaction ID : 3133044 |
| City The Woodlands | State TX | Zip Code 77381 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100.00 | |
| Name of Employer n/a | Occupation Retired | |
| 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. Mrs. Julie Steckel | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2011 |
| Mailing Address 1126 Bel Air Drive | | Transaction ID : 3125397 |
| City Santa Barbara | State CA | Zip Code 93105 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100.00 | |
| Name of Employer self | Occupation retired psychotherap | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 525.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 230.00 |
| 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 706 OF 2452 |
| | <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. Mrs. Julie Steckel
 Full Name (Last, First, Middle Initial)
 Mailing Address 1126 Bel Air Drive
 City Santa Barbara State CA Zip Code 93105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation retired psychotherap
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128051
 Amount of Each Receipt this Period
 75.00

B. Mr. Charles Steele
 Full Name (Last, First, Middle Initial)
 Mailing Address 809 Tolman Drive
 City Stanford State CA Zip Code 94305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Stanford University Occupation Professor
 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
 12 / 17 / 2011
Transaction ID : 3130698
 Amount of Each Receipt this Period
 125.00

C. Ms. Carolyn S. Steglich
 Full Name (Last, First, Middle Initial)
 Mailing Address 521 E Prairie Street
 City Harrisville State PA Zip Code 16038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Slippery Rock University Occupation scientist, college p
 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
 12 / 20 / 2011
Transaction ID : 3133045
 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 707 OF 2452 |
| | <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. Dee Stegman
Full Name (Last, First, Middle Initial)

Mailing Address 15 Reily Rd.

City Cincinnati State OH Zip Code 45215

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

Name of Employer Self Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 12 / 05 / 2011
Transaction ID : 3121585

Amount of Each Receipt this Period
 300.00

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

Mailing Address 830 De Mun Ave Apt 101

City Saint Louis State MO Zip Code 63105

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 ▼ 275.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3128523

Amount of Each Receipt this Period
 25.00

C. Mr. Daniel Stein
Full Name (Last, First, Middle Initial)

Mailing Address 12 Briar Ln

City Essex Junction State VT Zip Code 05452

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 ▼ 385.00

Date of Receipt
 12 / 04 / 2011
Transaction ID : 3120001

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00

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 708 OF 2452
(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. 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 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
 12 / 08 / 2011
Transaction ID : 3123945
 Amount of Each Receipt this Period
 500.00

B. Ms. Brigitte Steinmann Riddle
 Full Name (Last, First, Middle Initial)
 Mailing Address 1347 11th Street North
 City Naples State FL Zip Code 34102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HP Occupation Executive
 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
 12 / 16 / 2011
Transaction ID : 3131121
 Amount of Each Receipt this Period
 100.00

C. Ms. Sabrina Steketee
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 566
 City Boulder State MT Zip Code 59632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KEY Personnel, Inc. Occupation Employment Agent
 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
 12 / 26 / 2011
Transaction ID : 3135841
 Amount of Each Receipt this Period
 50.00

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 709 OF 2452 |
| | <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 D. Stelling
Full Name (Last, First, Middle Initial)
Mailing Address 425 W. 61st Terrace

| | | |
|---------------------|-------------|-------------------|
| City Kansas City | State MO | Zip Code 64113 |
|---------------------|-------------|-------------------|

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

| | |
|-------------------------------------|-----------------------------------|
| Name of Employer Burns/McDonnell | Occupation MECHANICAL ENGINEER |
|-------------------------------------|-----------------------------------|

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 |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3131522

Amount of Each Receipt this Period
2000.00

B. Ms. Ranada Stephenson
Full Name (Last, First, Middle Initial)
Mailing Address 475 El Centro Road

| | | |
|----------------------|-------------|-------------------|
| City Hillsborough | State CA | Zip Code 94010 |
|----------------------|-------------|-------------------|

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 ▼
1200.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 14 | / | 2011 |

Transaction ID : 3128119

Amount of Each Receipt this Period
100.00

C. Ms. Julia Stephenson
Full Name (Last, First, Middle Initial)
Mailing Address 19446 Northampton Dr.

| | | |
|------------------|-------------|-------------------|
| City Saratoga | State CA | Zip Code 95070 |
|------------------|-------------|-------------------|

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

| | |
|-------------------------------|---|
| Name of Employer REQUESTED | Occupation Retired computer specialist |
|-------------------------------|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2011 |

Transaction ID : 3133359

Amount of Each Receipt this Period
115.00

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 2215.00 |
| 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 710 OF 2452
(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 H. Sterling
 Full Name (Last, First, Middle Initial)
 Mailing Address 4932 Crestwood Drive
 City State Zip Code
 Waco TX 76710
 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 ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129347
 Amount of Each Receipt this Period
 200.00

B. Mrs. Claire M. Stern
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 W 12th St., Apt. 2E
 City State Zip Code
 New York NY 10011
 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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3122987
 Amount of Each Receipt this Period
 200.00

C. Mrs. Claire M. Stern
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 W 12th St., Apt. 2E
 City State Zip Code
 New York NY 10011
 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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134395
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 320.00
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 711 OF 2452 |
| | <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. Cynthia G Sterne

Mailing Address 862 De Haro St #B

| | | |
|-----------------------|-------------|-------------------|
| City San Francisco | State CA | Zip Code 94107 |
|-----------------------|-------------|-------------------|

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 ▼ **380.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3137484

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Ms. Kathryn C Stevens

Mailing Address 246 Penn Circle East Apartment

| | | |
|--------------------|-------------|-------------------|
| City Pittsburgh | State PA | Zip Code 15206 |
|--------------------|-------------|-------------------|

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 ▼ **265.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3127924

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Ms. Sally J Stevens-Eskew

Mailing Address 3104 Brookdale Road

| | | |
|------------------------|-------------|-------------------|
| City Studio City CA | State CA | Zip Code 91604 |
|------------------------|-------------|-------------------|

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

| | |
|------------------------------------|------------------------------------|
| Name of Employer freelance/self | Occupation singer/lyricist/chor |
|------------------------------------|------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119396

Amount of Each Receipt this Period
25.00

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 150.00 |
| 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 712 OF 2452 |
| | <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

A. Judy Stewart
Full Name (Last, First, Middle Initial)
Mailing Address 100 Morgan St
City Stamford State CT Zip Code 06905
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 ▼ 375.00

Date of Receipt
12 / 04 / 2011
Transaction ID : 3120027
Amount of Each Receipt this Period 25.00

B. Judy Stewart
Full Name (Last, First, Middle Initial)
Mailing Address 100 Morgan St
City Stamford State CT Zip Code 06905
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 ▼ 375.00

Date of Receipt
12 / 16 / 2011
Transaction ID : 3130702
Amount of Each Receipt this Period 10.00

C. Ms. Audrey K. Stewart
Full Name (Last, First, Middle Initial)
Mailing Address 107 Harrogate Rd.
City Saint Simons Island State GA Zip Code 31522
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation REQUESTED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
12 / 27 / 2011
Transaction ID : 3134703
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00
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 713 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Ms. Ruby Stickel | | Date of Receipt 12 / 18 / 2011 Transaction ID : 3131170 |
| Mailing Address 62392 Ash Rd | | Amount of Each Receipt this Period 25.00 |
| City Wakarusa | State IN | Zip Code 46573 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| 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) B. Ms. Dolores S. Stickler | | Date of Receipt 12 / 15 / 2011 Transaction ID : 3129814 |
| Mailing Address 2323 Pittston Ave. | | Amount of Each Receipt this Period 500.00 |
| City Scranton | State PA | Zip Code 18505 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1187.50 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Jessica Stickney | | Date of Receipt 12 / 16 / 2011 Transaction ID : 3131438 |
| Mailing Address 1400 Poly Dr., Apt. 8BC | | Amount of Each Receipt this Period 55.00 |
| City Billings | State MT | Zip Code 59102 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer REQUESTED | Occupation Homemaker | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 255.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 580.00 |
| 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 714 OF 2452 |
| | <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. Mr. James Stinger
 Full Name (Last, First, Middle Initial)
 Mailing Address 721 Christine Drive
 City Palo Alto State CA Zip Code 94303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Hewlett Packard Occupation Software Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 429.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3128983
 Amount of Each Receipt this Period
 44.00

B. Ms. Mary P Stoddard
 Full Name (Last, First, Middle Initial)
 Mailing Address 3705 Torino Drive
 City Santa Barbara State CA Zip Code 93105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Bookkeeper
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3129253
 Amount of Each Receipt this Period
 30.00

C. Ms. Virginia Stone
 Full Name (Last, First, Middle Initial)
 Mailing Address 25713 Hatton Rd.
 City Carmel State CA Zip Code 93923
 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 ▼ 325.00

Date of Receipt
 12 / 21 / 2011
Transaction ID : 3133909
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 124.00
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 715 OF 2452 |
| | <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. Norma K. K. Stone
 Full Name (Last, First, Middle Initial)
 Mailing Address 3601 Turtle Creek Blvd #404
 # 404
 City Dallas State TX Zip Code 75214
 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 ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119349
 Amount of Each Receipt this Period
 250.00

B. Ms. Barbara Stone
 Full Name (Last, First, Middle Initial)
 Mailing Address 7726 Meadowvale
 City Houston State TX Zip Code 77063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer IntecSea Occupation engineer
 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
 12 / 22 / 2011
Transaction ID : 3134309
 Amount of Each Receipt this Period
 25.00

C. Mr. Martin Stone
 Full Name (Last, First, Middle Initial)
 Mailing Address 260 El Verano Ave
 City Palo Alto State CA Zip Code 94306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation consultant
 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
 12 / 19 / 2011
Transaction ID : 3132517
 Amount of Each Receipt this Period
 25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 300.00 |
| 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 716 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|----------|---|
| Full Name (Last, First, Middle Initial) A. Ms. Bonnie C stone | | Date of Receipt |
| Mailing Address 395 Broadway | | M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2011 |
| City ny | State NY | Zip Code 10013 |
| FEC ID number of contributing federal political committee. C | | Transaction ID : 3130994 |
| Name of Employer Women In Need | | Amount of Each Receipt this Period |
| Occupation Executive | | 1000.00 |
| 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. Mary L. Stoolmiller | | Date of Receipt |
| Mailing Address 6143 Walker Dr. | | M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2011 |
| City Troy | State MI | Zip Code 48085 |
| FEC ID number of contributing federal political committee. C | | Transaction ID : 3134065 |
| Name of Employer n/a | | Amount of Each Receipt this Period |
| Occupation Retired | | 100.00 |
| 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) C. Mrs. Amalia Stott | | Date of Receipt |
| Mailing Address 1790 Hopkins Avenue | | M M M / D D D / Y Y Y Y Y Y 12 / 21 / 2011 |
| City Redwood City | State CA | Zip Code 94062 |
| FEC ID number of contributing federal political committee. C | | Transaction ID : 3134005 |
| Name of Employer EMILY's List | | Amount of Each Receipt this Period |
| Occupation Director of Development | | 1000.00 |
| 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).....▶ | 1200.00 |
| 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 717 OF 2452 |
| | <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. Barbara S. Stowe
Full Name (Last, First, Middle Initial)

Mailing Address 11507 Woodstock Way

City Reston State VA Zip Code 20194

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

Name of Employer Kansas State Univ Occupation Dean and Prof, retir

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : 3139094

Amount of Each Receipt this Period
 100.00

B. Ms. Marion Strack
Full Name (Last, First, Middle Initial)

Mailing Address 7406 Spring Village Drive Apartment 111

City Springfield State VA Zip Code 22150

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 ▼ 844.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011

Transaction ID : 3126308

Amount of Each Receipt this Period
 244.40

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

Mailing Address 2200 Newton Ave S

City Minneapolis State MN Zip Code 55405

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

Name of Employer MetLife Occupation marketing

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
 12 / 06 / 2011

Transaction ID : 3121787

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 594.40

TOTAL This Period (last page this line 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 718 OF 2452 |
| | <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. Katherine Strandburg
Full Name (Last, First, Middle Initial)
Mailing Address 100 Bleecker St. Apt. 19D

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10012 |
|------------------|-------------|-------------------|

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

| | |
|---|--------------------------------|
| Name of Employer New York University | Occupation Professor of Law |
|---|--------------------------------|

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 |
| 12 | / | 23 | / | 2011 |

Transaction ID : 3135565

Amount of Each Receipt this Period
50.00

B. Ms. Diana Strassmann
Full Name (Last, First, Middle Initial)
Mailing Address 5211 Briar Drive

| | | |
|-----------------|-------------|-------------------|
| City Houston | State TX | Zip Code 77056 |
|-----------------|-------------|-------------------|

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

| | |
|-------------------------------------|-------------------------|
| Name of Employer Rice University | Occupation Professor |
|-------------------------------------|-------------------------|

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 |
| 12 | / | 19 | / | 2011 |

Transaction ID : 3132404

Amount of Each Receipt this Period
5000.00

C. Ms. Janice Stratton
Full Name (Last, First, Middle Initial)
Mailing Address 5411 Cole Mill Rd

| | | |
|----------------|-------------|-------------------|
| City Durham | State NC | Zip Code 27705 |
|----------------|-------------|-------------------|

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 ▼
235.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 28 | / | 2011 |

Transaction ID : 3137709

Amount of Each Receipt this Period
20.00

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 5070.00 |
| 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 719 OF 2452 |
| | <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. Arthur Strauss | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2011 |
| Mailing Address 8 Blanchard | | Transaction ID : 3124594 |
| City Irvine | State CA | Zip Code 92603 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500.00 | |
| Name of Employer MEDNAX | Occupation Physician | |
| 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. Gary E. Striker | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2011 |
| Mailing Address 201 east 79th Street P.O. Box 019132 | | Transaction ID : 3131061 |
| City New York | State NY | Zip Code 10075 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100.00 | |
| Name of Employer Mount Sinai School of Medicine | Occupation research | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 385.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Ogie Strogatz | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2011 |
| Mailing Address 189 Miramonte Road | | Transaction ID : 3126321 |
| City Walnut Creek | State CA | Zip Code 94597 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 68.00 | |
| Name of Employer Genentech | Occupation operations manager | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 224.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 668.00 |
| 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 720 OF 2452 |
| | <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. Ellen Strot | | Date of Receipt |
| Mailing Address 7432 SW 53rd Ct | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Miami | FL | 33143 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3129051 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| REQUESTED | REQUESTED | <input type="text" value="24.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="264.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Kathleen Stuart | | Date of Receipt |
| Mailing Address 4300 West River Pkwy | | <input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Minneapolis | MN | 55406 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3133911 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| n/a | Retired | <input type="text" value="200.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="525.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Maureen Stuart | | Date of Receipt |
| Mailing Address 316 Walnut Grove Rd. | | <input type="text" value="12"/> / <input type="text" value="14"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Peachtree City | GA | 30269 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3127930 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| none | Homemaker | <input type="text" value="150.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="275.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="374.00"/> |
| 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 721 OF 2452 |
| | (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. Patricia Stubblefield | | Date of Receipt |
| Mailing Address 3905 Rive Lane | | <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2011"/> |
| City Addison State TX Zip Code 75001 | | Transaction ID : 3119326 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer n/a Occupation Retired | | <input type="text" value="100.00"/> |
| 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. Mr. Galen Stucky | | Date of Receipt |
| Mailing Address 973 West Campus Lane | | <input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2011"/> |
| City Santa Barbara State CA Zip Code 93117 | | Transaction ID : 3134231 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer u california Occupation teacher | | <input type="text" value="35.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="245.00"/> |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Mr. Phillip R Sturdevant | | Date of Receipt |
| Mailing Address 9026 S. Oxeye Ave | | <input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2011"/> |
| City Baldwin State MI Zip Code 49304 | | Transaction ID : 3133912 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer none Occupation Retired Teacher | | <input type="text" value="20.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text" value="240.00"/> |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="155.00"/> |
| 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 722 OF 2452
(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. Mrs. Joanne Styles

Mailing Address 1255 W Main St.

City Whitewater State WI Zip Code 53190

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 ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011
Transaction ID : 3133913

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Ms. Susan C Styn

Mailing Address 3268 Governor Dr #301

City San Diego State CA Zip Code 92122

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 ▼
320.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128094

Amount of Each Receipt this Period
100.00

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

Mailing Address 17 Munroe Street

City Newton State MA Zip Code 02460

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

Name of Employer Mintz Levin Occupation attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128453

Amount of Each Receipt this Period
100.00

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 723 OF 2452 |
| | <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. Ken Sultanof
Full Name (Last, First, Middle Initial)

Mailing Address 160 Millstone Road

| | | |
|----------------------------|-------------|-------------------|
| City Millstone Township | State NJ | Zip Code 08535 |
|----------------------------|-------------|-------------------|

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 ▼
245.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : 3119328

Amount of Each Receipt this Period
25.00

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

Mailing Address 401 Hillcrest Way

| | | |
|--------------------|-------------|-------------------|
| City Bellingham | State WA | Zip Code 98225 |
|--------------------|-------------|-------------------|

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

| | |
|-------------------------------|---------------------------------|
| Name of Employer REQUESTED | Occupation Ordained Minister |
|-------------------------------|---------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128842

Amount of Each Receipt this Period
20.00

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

Mailing Address 250 PANTOPS MOUNTAIN ROAD

| | | |
|-------------------------|-------------|-------------------|
| City Charlottesville | State VA | Zip Code 22911 |
|-------------------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 14 | / | 2011 |

Transaction ID : 3127935

Amount of Each Receipt this Period
100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 145.00 |
| 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 724 OF 2452 |
| | <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. Pamela K Sutherland | | Date of Receipt |
| Mailing Address PO Box 41796 | | <input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Tucson | AZ | 85717 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3121179 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="1300.00"/> |
| Name of Employer | Occupation | |
| self | lawyer | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="1300.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Amanda Sutphin | | Date of Receipt |
| Mailing Address 75 Henry Street, 31F | | <input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Brooklyn | NY | 11201 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3137126 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="250.00"/> |
| Name of Employer | Occupation | |
| NYC | Archaeologist | |
| 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. Dayna Swanson | | Date of Receipt |
| Mailing Address 5920 April Ln | | <input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Missoula | MT | 59803 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3133914 |
| FEC ID number: <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="25.00"/> |
| Name of Employer | Occupation | |
| US Federal Government | Manager | |
| 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="1575.00"/> |
| 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 725 OF 2452 |
| | (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. Marsha Swislocki
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 797
 City Hanover State NH Zip Code 03755
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dartmouth College Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 247.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3121696
 Amount of Each Receipt this Period
 112.00

B. Ms. Rae Ellen Ellen Syverson
 Full Name (Last, First, Middle Initial)
 Mailing Address W2756 Poplar Road
 City Fond du Lac State WI Zip Code 54937
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired Microbiologi
 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
 12 / 21 / 2011
Transaction ID : 3133916
 Amount of Each Receipt this Period
 250.00

C. Ms. Karen Joanne Syzmanski
 Full Name (Last, First, Middle Initial)
 Mailing Address 113 Princeton Rd.
 City Menlo Park State CA Zip Code 94025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation Homemaker
 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
 12 / 27 / 2011
Transaction ID : 3134734
 Amount of Each Receipt this Period
 500.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 862.00 |
| 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 726 OF 2452 |
| | <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. Dr. Elda Tate
Full Name (Last, First, Middle Initial)

Mailing Address 814 W. College

| | | |
|-------------------|-------------|-------------------|
| City Marquette | State MI | Zip Code 49855 |
|-------------------|-------------|-------------------|

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

| | |
|--|-------------------------|
| Name of Employer Northern Michigan University | Occupation Professor |
|--|-------------------------|

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 |
| 12 | / | 13 | / | 2011 |

Transaction ID : 3126694

Amount of Each Receipt this Period
100.00

B. Ms. Linda Taub
Full Name (Last, First, Middle Initial)

Mailing Address 6 Dogwood HI.

| | | |
|-------------------|-------------|-------------------|
| City Glen Head | State NY | Zip Code 11545 |
|-------------------|-------------|-------------------|

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 ▼
225.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 12 | / | 2011 |

Transaction ID : 3125462

Amount of Each Receipt this Period
100.00

C. Mr. David Tauber
Full Name (Last, First, Middle Initial)

Mailing Address 35 Applecroft Lane

| | | |
|-----------------------|-------------|-------------------|
| City Center Conway | State NH | Zip Code 03813 |
|-----------------------|-------------|-------------------|

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

| | |
|---|-----------------------------|
| Name of Employer Yale New Haven Hospital | Occupation EMS Education |
|---|-----------------------------|

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 |
| 12 | / | 11 | / | 2011 |

Transaction ID : 3125727

Amount of Each Receipt this Period
20.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 220.00 |
| 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 727 OF 2452 |
| | <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. Dr. Jean E Taylor
 Full Name (Last, First, Middle Initial)
 Mailing Address 2025 BROADWAY APT 30D
 Apt 30D
 City New York State NY Zip Code 10023
 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 ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011
Transaction ID : 3133937
 Amount of Each Receipt this Period
 1000.00

B. Susan Taylor
 Full Name (Last, First, Middle Initial)
 Mailing Address 2610 Allen St Apt. 2610
 City Dallas State TX Zip Code 75204
 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 ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 26 / 2011
Transaction ID : 3135886
 Amount of Each Receipt this Period
 15.00

C. Ms. Patricia Taylor
 Full Name (Last, First, Middle Initial)
 Mailing Address 1410 Summit Ave.
 City Saint Paul State MN Zip Code 55105
 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 ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132186
 Amount of Each Receipt this Period
 150.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1165.00 |
| 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 728 OF 2452
(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. Jacquetta Taylor

Mailing Address 1860 Fisher Rd

City State Zip Code
Roseburg OR 97471

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 ▼
318.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 06 / 2011
Transaction ID : 3121926

Amount of Each Receipt this Period
106.00

Full Name (Last, First, Middle Initial)
B. Mr. John Taylor

Mailing Address 119 Lee's Creek Road

City State Zip Code
Fayetteville TN 37334

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

Name of Employer Occupation
self-employed landscape designer

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
12 / 16 / 2011
Transaction ID : 3131147

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
C. Ms. Sue Taylor Brown

Mailing Address 10069 Windstream Dr
Apt. #4

City State Zip Code
Columbia MD 21044

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 ▼
445.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2011
Transaction ID : 3119913

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 191.00

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 729 OF 2452 |
| | <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. Doris Teplitz
 Full Name (Last, First, Middle Initial)
 Mailing Address 8615 Terrace Garden Way
 City State Zip Code
 Bethesda MD 20814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation Physicist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130824
 Amount of Each Receipt this Period
 125.00

B. Ms. Paulette Thabault
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 Quail Run
 City State Zip Code
 South Burlington VT 05403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SState of Vermont Occupation Commissioner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3124897
 Amount of Each Receipt this Period
 20.00

C. Mr. John Thalheimer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1410 Woodland Road
 City State Zip Code
 Rydal PA 19046
 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 ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129873
 Amount of Each Receipt this Period
 5000.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 5145.00 |
| 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 730 OF 2452 |
| | <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. Michael P. Theisen
 Full Name (Last, First, Middle Initial)
 Mailing Address 444 36th Avenue
 City Seattle State WA Zip Code 98122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer P Occupation physician
 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
 12 / 31 / 2011
Transaction ID : 3139145
 Amount of Each Receipt this Period
 300.00

B. Ms. Marta Theisen
 Full Name (Last, First, Middle Initial)
 Mailing Address 1404 Kensington
 City Grosse Pointe State MI Zip Code 48230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation parent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2011
Transaction ID : 3119864
 Amount of Each Receipt this Period
 50.00

C. Ms. Elizabeth A. Theve
 Full Name (Last, First, Middle Initial)
 Mailing Address 262 Spring Street, # 177
 City Block Island State RI Zip Code 02807
 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 ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128569
 Amount of Each Receipt this Period
 15.00

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 95.00 |
| 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 731 OF 2452
(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 Thibodo
 Full Name (Last, First, Middle Initial)
 Mailing Address 160 White Hollow Rd.
 City Sharon State CT Zip Code 06069
 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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131968
 Amount of Each Receipt this Period
 100.00

B. Ms. Peggy Thieriot
 Full Name (Last, First, Middle Initial)
 Mailing Address 32 Cottage Street
 City Great Barrington State MA Zip Code 01230
 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 ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129466
 Amount of Each Receipt this Period
 20.00

C. Ms. Barbara H. Thimsen
 Full Name (Last, First, Middle Initial)
 Mailing Address 4165 N. Sandcastle Place
 City Boise State ID Zip Code 83703
 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 ▼ 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129254
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 732 OF 2452
(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. Kimberlie Thomas

Mailing Address 511 N. Gully

City Dearborn Heights State MI Zip Code 48127

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

Name of Employer Self employed Occupation Pet Sitter

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129442

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Ms. Mary Thompson

Mailing Address 501 Owen Rd.

City Monona State WI Zip Code 53716

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 ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131983

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
C. Dr. Robert S. Thompson

Mailing Address 16316 Alpine Drive East

City Enumclaw State WA Zip Code 98022

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 ▼ **260.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133148

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **80.00**

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 734 OF 2452 |
| | <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 Thompson

Mailing Address PO Box 1498

City Southern Pines State NC Zip Code 28388

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 ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 27 / 2011

Transaction ID : 3134771

Amount of Each Receipt this Period
125.00

Full Name (Last, First, Middle Initial)
B. Ms. Laura M Thorpe

Mailing Address 708 Conservatory Drive

City Eldersburg State MD Zip Code 21784

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

Name of Employer Veteran's Administration Hospital Occupation Clinical Social Work

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
12 / 20 / 2011

Transaction ID : 3133193

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Ms. Carolyn C. Thorsen

Mailing Address 50 Biscayne Dr NW Unit 5114

City Atlanta State GA Zip Code 30309

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 ▼ **265.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2011

Transaction ID : 3125998

Amount of Each Receipt this Period
25.00

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 250.00 |
| 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 735 OF 2452 |
| | <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. Judith Thoyer
Full Name (Last, First, Middle Initial)

Mailing Address 1115 5th Ave.

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10128 |
|------------------|-------------|-------------------|

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

| | |
|---|------------------------|
| Name of Employer Paul Weiss Rifkind Wharton & Garrison (| Occupation Attorney |
|---|------------------------|

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 |
| 12 | / | 20 | / | 2011 |

Transaction ID : 3133386

Amount of Each Receipt this Period
1000.00

B. Mr. Homer Thrall Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 281 W. 8th Street

| | | |
|--------------------|-------------|-------------------|
| City Marysville | State OH | Zip Code 43040 |
|--------------------|-------------|-------------------|

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 ▼
320.12

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 06 | / | 2011 |

Transaction ID : 3121737

Amount of Each Receipt this Period
100.00

C. Dr. Audrey Tieger
Full Name (Last, First, Middle Initial)

Mailing Address 519 S. Fuller Ave.

| | | |
|---------------------|-------------|-------------------|
| City Los Angeles | State CA | Zip Code 90036 |
|---------------------|-------------|-------------------|

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

| | |
|--|--------------------------------|
| Name of Employer Retired from LAUSD | Occupation Retired Educator |
|--|--------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 14 | / | 2011 |

Transaction ID : 3128461

Amount of Each Receipt this Period
20.00

| | | |
|---|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | ▶ | 1120.00 |
| 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 736 OF 2452 |
| | <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. Audrey Tieger
Full Name (Last, First, Middle Initial)

Mailing Address 519 S. Fuller Ave.

| | | |
|---------------------|-------------|-------------------|
| City Los Angeles | State CA | Zip Code 90036 |
|---------------------|-------------|-------------------|

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

| | |
|--|--------------------------------|
| Name of Employer Retired from LAUSD | Occupation Retired Educator |
|--|--------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 19 | / | 2011 |

Transaction ID : 3132407

Amount of Each Receipt this Period

| |
|--------|
| 120.00 |
|--------|

B. Ms. Johanna Tilbury
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 2595

| | | |
|-----------------|-------------|-------------------|
| City Kamuela | State HI | Zip Code 96743 |
|-----------------|-------------|-------------------|

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

| | |
|---|-----------------------------------|
| Name of Employer Hui Kamana Builders | Occupation Building Contractor |
|---|-----------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128567

Amount of Each Receipt this Period

| |
|-------|
| 75.00 |
|-------|

C. Ms. Ellen Tilden
Full Name (Last, First, Middle Initial)

Mailing Address 5723 Picardy Drive

| | | |
|-----------------|-------------|-------------------|
| City Oakland | State CA | Zip Code 94605 |
|-----------------|-------------|-------------------|

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

| | |
|-----------------------------------|------------------------------------|
| Name of Employer Gordon & Rees | Occupation Legal Word Processor |
|-----------------------------------|------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 10 | / | 2011 |

Transaction ID : 3126038

Amount of Each Receipt this Period

| |
|-------|
| 25.00 |
|-------|

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 120.00 |
| 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 737 OF 2452
(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. Peg B. Tileston
 Full Name (Last, First, Middle Initial)
 Mailing Address 4780 Cambridge Way
 City Anchorage State AK Zip Code 99503
 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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : 3123670
 Amount of Each Receipt this Period
 100.00

B. Ms. Kathryn L. Tillson
 Full Name (Last, First, Middle Initial)
 Mailing Address 8006 Walden Road
 City Baton Rouge State LA Zip Code 70808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Investment
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128731
 Amount of Each Receipt this Period
 20.00

C. Dr. Julie K. Timins
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 FOOTES LN
 City Morristown State NJ Zip Code 07960
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Physician
 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
 12 / 31 / 2011
Transaction ID : 3139068
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
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 738 OF 2452 |
| | <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. Brian Tinsley
Full Name (Last, First, Middle Initial)
Mailing Address 14371 Haymeadow Cir.
City Dallas State TX Zip Code 75254
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 12 / 21 / 2011
Transaction ID : 3133673
Amount of Each Receipt this Period 600.00

B. Peter Tishler
Full Name (Last, First, Middle Initial)
Mailing Address 199 Cooldige Avenue Apt. 510
City Watertown State MA Zip Code 02472
FEC ID number of contributing federal political committee. **C**
Name of Employer retired (and still working!) Occupation MD
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 235.00

Date of Receipt 12 / 14 / 2011
Transaction ID : 3128201
Amount of Each Receipt this Period 10.00

C. pat titus
Full Name (Last, First, Middle Initial)
Mailing Address 5528 ross neck rd
City cambridge State MD Zip Code 21613
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 12 / 29 / 2011
Transaction ID : 3138111
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional).....▶ 660.00
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 739 OF 2452 |
| | <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. William S. Tjader
Full Name (Last, First, Middle Initial)

Mailing Address 9123 Willoughby Rd.

City Pittsburgh State PA Zip Code 15237

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

Name of Employer ppg industries, inc Occupation ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3133476

Amount of Each Receipt this Period
 75.00

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

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

Name of Employer Stanford University Occupation Physician/Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011

Transaction ID : 3127955

Amount of Each Receipt this Period
 500.00

C. Ms. Mary A. Tondreau
Full Name (Last, First, Middle Initial)

Mailing Address 2507 N. Sycamore Street

City Arlington State VA Zip Code 22207

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 ▼ 2400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011

Transaction ID : 3130733

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 740 OF 2452
(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. Marlene Sanders Toobin
 Full Name (Last, First, Middle Initial)
 Mailing Address 670 W End Ave., Apt. 14A
 #14A
 City New York State NY Zip Code 10025
 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 ▼ 440.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131841
 Amount of Each Receipt this Period
 140.00

B. Viola Torgerson
 Full Name (Last, First, Middle Initial)
 Mailing Address 4010 Pineridge St
 City Houston State TX Zip Code 77009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation stay at home mother
 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
 12 / 14 / 2011
Transaction ID : 3128244
 Amount of Each Receipt this Period
 100.00

C. Ms. Roseanna Torretto
 Full Name (Last, First, Middle Initial)
 Mailing Address 2434 Via Camino Avenue
 City Carmichael State CA Zip Code 95608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State of California Occupation Systems Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3126226
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 440.00
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 741 OF 2452 |
| | <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. John Townsend
Full Name (Last, First, Middle Initial)
Mailing Address 1256 Royal Ave.
City Louisville State KY Zip Code 40204
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 ▼ 350.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3132013
Amount of Each Receipt this Period 50.00

B. Ms. Lili Townsend
Full Name (Last, First, Middle Initial)
Mailing Address 3288 Waileia Pl
City Kihei State HI Zip Code 96753
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 ▼ 475.00

Date of Receipt 12 / 07 / 2011
Transaction ID : 3123353
Amount of Each Receipt this Period 275.00

C. Victorine Trammell
Full Name (Last, First, Middle Initial)
Mailing Address 5442 S Cedar St
City Littleton State CO Zip Code 80120
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 ▼ 276.00

Date of Receipt 12 / 06 / 2011
Transaction ID : 3121853
Amount of Each Receipt this Period 126.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 451.00
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 742 OF 2452 |
| | <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. Karen Tramontano | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 01 / 2011 Transaction ID : 3119330 |
| Mailing Address PO Box 91456 | | Amount of Each Receipt this Period 500.00 |
| City Washington | State DC | Zip Code 20090 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Blue Star Strategies, LLC | Occupation Attorney/Consultant | |
| 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. Ms. Marjorie Traub | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2011 Transaction ID : 3130829 |
| Mailing Address 2760 Vallejo Street | | 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 none | Occupation ret. | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 3000.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mrs. Lila Travis | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 19 / 2011 Transaction ID : 3132020 |
| Mailing Address 48 Lydia Drive | | Amount of Each Receipt this Period 150.00 |
| City West New York | State NJ | Zip Code 07093 |
| 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 ▼ 275.00 | |

| | |
|--|---------|
| 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 743 OF 2452 |
| | <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. Ms. Carol Triebel | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2011 |
| Mailing Address 2829 Nottingham St | | Transaction ID : 3130991 |
| City Houston | State TX | Zip Code 77005 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Orica Mining Services | Occupation Manager | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1700.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Candace Trinchieri | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 17 / 2011 |
| Mailing Address 14709 Valleyheart Dr | | Transaction ID : 3130739 |
| City Sherman Oaks | State CA | Zip Code 91403 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 20.00 |
| Name of Employer Cancer Support Community-Benjamin Cent | Occupation Special Events Manag | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 256.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Lynn Tripp | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 203 Magnolia Ave | | Transaction ID : 3128469 |
| City Modesto | State CA | Zip Code 95354 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 20.00 |
| Name of Employer Psychiatric Medical Group | Occupation Nurse practitioner | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 260.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1040.00 |
| 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 744 OF 2452 |
| | <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. Lynn Tripp
Full Name (Last, First, Middle Initial)

Mailing Address 203 Magnolia Ave

City Modesto State CA Zip Code 95354

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

Name of Employer Psychiatric Medical Group Occupation Nurse practitioner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 25 / 2011
Transaction ID : 3135573

Amount of Each Receipt this Period 10.00

B. Ms. Judith Troestler
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 370306

City Milwaukee State WI Zip Code 53237

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 ▼ 300.00

Date of Receipt 12 / 22 / 2011
Transaction ID : 3134308

Amount of Each Receipt this Period 25.00

C. Mrs. Rose Troyer
Full Name (Last, First, Middle Initial)

Mailing Address 204 Berlin Way

City Morrisville State NC Zip Code 27560

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 12 / 15 / 2011
Transaction ID : 3128651

Amount of Each Receipt this Period 40.00

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

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 745 OF 2452
(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. Lindsey S. Tucker
 Full Name (Last, First, Middle Initial)
 Mailing Address 8735 S.W. 54th Ter.
 City Miami State FL Zip Code 33165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Miami Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : 3138218
 Amount of Each Receipt this Period
 30.00

B. Mrs. Muriel Turetsky
 Full Name (Last, First, Middle Initial)
 Mailing Address 1301 Carter Dr.
 City Rockaway State NJ Zip Code 07866
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bergen Community College Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129807
 Amount of Each Receipt this Period
 115.00

C. Ms. Susan Turnbull
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 Royal Dominion Court
 City Bethesda State MD Zip Code 20817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U.S. House of Representatives Occupation Grants Advisor
 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
 12 / 07 / 2011
Transaction ID : 3123651
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 645.00
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 746 OF 2452 |
| | <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. Charlene G. Turner | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 1109 Ramada Drive | | Transaction ID : 3128785 |
| City Houston | State TX | Zip Code 77062 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 20.00 |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mrs. Jeanne C. Turner | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2011 |
| Mailing Address 1490 Via Isola | | Transaction ID : 3130895 |
| City Monterey | State CA | Zip Code 93940 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 10.00 |
| Name of Employer None | Occupation Retired teacher | |
| 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. Chris Turner | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2011 |
| Mailing Address 600 Bridlespur Lane | | Transaction ID : 3126798 |
| City Earlysville | State VA | Zip Code 22936 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 |
| Name of Employer Self | Occupation Writer | |
| 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).....▶ | 80.00 |
| 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 747 OF 2452 |
| | <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. Mr. Dale Tussing
 Full Name (Last, First, Middle Initial)
 Mailing Address 205 E Seneca Tpke.
 City Syracuse State NY Zip Code 13205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Syracuse University Occupation Retired Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130745
 Amount of Each Receipt this Period
 100.00

B. Ms. Elizabeth Tuura
 Full Name (Last, First, Middle Initial)
 Mailing Address 2016 Foxboro Dr.
 City Orlando State FL Zip Code 32812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TV Professional Occupation Self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130746
 Amount of Each Receipt this Period
 75.00

C. Mr. Robert D Tyre
 Full Name (Last, First, Middle Initial)
 Mailing Address 2777 Paradise Road, Unit 3502
 City Las Vegas State NV Zip Code 89109
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130747
 Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 275.00 |
| 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 748 OF 2452 |
| | <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. Margaret Ulf | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 3129121 |
| Mailing Address 2474 Colvin Road | | Amount of Each Receipt this Period 40.00 |
| City Amissville | State VA | Zip Code 20106 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer REQUESTED | Occupation Housewife | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 320.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Mr. Howard Ulstein | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2011 Transaction ID : 3138551 |
| Mailing Address 8201 SW 24 St | | Amount of Each Receipt this Period 50.00 |
| City North Lauderdale | State FL | Zip Code 33068 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer boca raton regional hospital | Occupation LAB SYSTEM MGR | |
| 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. Anne Urban | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 Transaction ID : 3126100 |
| Mailing Address 113 Grafton Street | | Amount of Each Receipt this Period 500.00 |
| City Chavy Chase | State MD | Zip Code 20815 |
| 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).....▶ | 590.00 |
| 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 749 OF 2452 |
| | <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. Marianna Vaidman Stone
Full Name (Last, First, Middle Initial)
Mailing Address 10 Waterside Plaza Apt. 35D

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10010 |
|------------------|-------------|-------------------|

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

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

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128470

Amount of Each Receipt this Period
1000.00

B. Ms. Eleanor Valentine
Full Name (Last, First, Middle Initial)
Mailing Address 354 Depew Ave

| | | |
|-----------------|-------------|-------------------|
| City Buffalo | State NY | Zip Code 14214 |
|-----------------|-------------|-------------------|

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

| | |
|--|-------------------------|
| Name of Employer Ohio State University. | Occupation Librarian |
|--|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 08 | / | 2011 |

Transaction ID : 3124887

Amount of Each Receipt this Period
50.00

C. Gail Van Buuren
Full Name (Last, First, Middle Initial)
Mailing Address 7887 Welter Ln

| | | |
|--------------------|-------------|-------------------|
| City Sebastopol | State CA | Zip Code 95472 |
|--------------------|-------------|-------------------|

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

| | |
|--------------------------|-------------------------------|
| Name of Employer self | Occupation psychotherapist |
|--------------------------|-------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 12 | / | 2011 |

Transaction ID : 3125494

Amount of Each Receipt this Period
150.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1200.00 |
| 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 750 OF 2452 |
| | <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. Linda P. VanBuskirk
Full Name (Last, First, Middle Initial)

Mailing Address 3100 State Route 90N

City Aurora State NY Zip Code 13026

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

Name of Employer Cornell University Occupation faculty

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129493

Amount of Each Receipt this Period
 200.00

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

Mailing Address 362 S Morning Sun Ave.

City Mill Valley State CA Zip Code 94941

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

Name of Employer san francisco UV Occupation PROFESSOR

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
 12 / 27 / 2011

Transaction ID : 3134923

Amount of Each Receipt this Period
 400.00

C. Ms. Margaret E. VanGundy
Full Name (Last, First, Middle Initial)

Mailing Address 1176 Lagonda Ave

City Springfield State OH Zip Code 45503

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 ▼ 1020.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : 3121155

Amount of Each Receipt this Period
 85.00

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: (check only one) | PAGE 751 OF 2452 |
| | <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. Andrea VanHouweling
 Full Name (Last, First, Middle Initial)
 Mailing Address 920 Lincoln Avenue
 City Ann Arbor State MI Zip Code 48104
 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 ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129393
 Amount of Each Receipt this Period
 35.00

B. Ms. Linna VanNette
 Full Name (Last, First, Middle Initial)
 Mailing Address 141 Duncan Trail
 City Longwood State FL Zip Code 32779
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UnitedHealthcare Occupation regulatory affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2011
Transaction ID : 3138623
 Amount of Each Receipt this Period
 100.00

C. Dr. Karin Vargervik
 Full Name (Last, First, Middle Initial)
 Mailing Address 332 Willow Ave.
 City Corte Madera State CA Zip Code 94925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Univ. Of California, S.F. Occupation Orthodontist
 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
 12 / 27 / 2011
Transaction ID : 3134537
 Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 235.00 |
| 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 752 OF 2452
(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. Suparna Vashisht
 Full Name (Last, First, Middle Initial)
 Mailing Address 17851 Daves Ave
 City State Zip Code
 Monte Sereno CA 95030
 Date of Receipt: 12 / 23 / 2011
Transaction ID : 3135694
 Amount of Each Receipt this Period: 100.00
 FEC ID number of contributing federal political committee: C
 Name of Employer self Occupation Sustainability
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼: 1100.00

B. Ms. Diane Vass
 Full Name (Last, First, Middle Initial)
 Mailing Address 4115 Park Blvd.
 City State Zip Code
 Palo Alto CA 94306
 Date of Receipt: 12 / 15 / 2011
Transaction ID : 3129401
 Amount of Each Receipt this Period: 20.00
 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 ▼: 240.00

C. Mrs. Mary C. Vassallo
 Full Name (Last, First, Middle Initial)
 Mailing Address 81 Greenmount Ter.
 City State Zip Code
 Waterbury CT 06708
 Date of Receipt: 12 / 27 / 2011
Transaction ID : 3134652
 Amount of Each Receipt this Period: 100.00
 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 ▼: 300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
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 753 OF 2452 |
| | <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. Victoria Vaughan
 Full Name (Last, First, Middle Initial)
 Mailing Address 1014 W Nicolet St.
 City Banning State CA Zip Code 92220
 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 ▼ 225.00

Date of Receipt
 12 / 16 / 2011
Transaction ID : 3131629
 Amount of Each Receipt this Period
 35.00

B. Ms. Kathryn Veal
 Full Name (Last, First, Middle Initial)
 Mailing Address 4309 W. 63RD Street
 City Prairie Village State KS Zip Code 66208
 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 ▼ 240.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3129432
 Amount of Each Receipt this Period
 20.00

C. Ms. Karen S. Vecellio
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 Rothermel Avenue
 City Kinderhook State NY Zip Code 12106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ichabod Crane Occupation Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3129280
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 754 OF 2452 |
| | <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. Peter J. Vennewitz
Full Name (Last, First, Middle Initial)

Mailing Address 111 S.W. Harrison St.
#14

City Portland State OR Zip Code 97201

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 ▼
220.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3128501

Amount of Each Receipt this Period
10.00

B. Ms. Shelley Vereen
Full Name (Last, First, Middle Initial)

Mailing Address 3131 Connecticut Avenue NW, Ap

City Washington State DC Zip Code 20008

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

Name of Employer SICPA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
12 / 08 / 2011
Transaction ID : 3124749

Amount of Each Receipt this Period
100.00

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

Mailing Address 6740 Ridges CT

City Bettendorf State IA Zip Code 52722

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

Name of Employer Genesis Medical Center Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
12 / 28 / 2011
Transaction ID : 3137187

Amount of Each Receipt this Period
50.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 160.00 |
| 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 755 OF 2452 |
| | <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. Brenton VerPloeg
Full Name (Last, First, Middle Initial)
Mailing Address 100 SE Second Street, 30th Fl
City Miami State FL Zip Code 33131
FEC ID number of contributing federal political committee. **C**
Name of Employer VerPloeg & Lumpkin, PA Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 12 / 20 / 2011
Transaction ID : 3133083
Amount of Each Receipt this Period 15.00

B. Brenton VerPloeg
Full Name (Last, First, Middle Initial)
Mailing Address 100 SE Second Street, 30th Fl
City Miami State FL Zip Code 33131
FEC ID number of contributing federal political committee. **C**
Name of Employer VerPloeg & Lumpkin, PA Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 12 / 29 / 2011
Transaction ID : 3138131
Amount of Each Receipt this Period 100.00

C. Dr. Judy Vickrey
Full Name (Last, First, Middle Initial)
Mailing Address 1700 sunrise
City Warrensburg State MO Zip Code 64093
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 12 / 14 / 2011
Transaction ID : 3128050
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional).....▶ 365.00
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 756 OF 2452
(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. Kathleen Villacorta
 Full Name (Last, First, Middle Initial)
 Mailing Address 2057 Florida Ave.
 City Tallahassee State FL Zip Code 32303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131999
 Amount of Each Receipt this Period
 1000.00

B. Ms. Betty Vlack
 Full Name (Last, First, Middle Initial)
 Mailing Address 1407 Oak Avenue
 City Davis State CA Zip Code 95616
 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 ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131001
 Amount of Each Receipt this Period
 50.00

C. Dr. Judith Voet
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 Tanglewood Circle
 City Rose Valley State PA Zip Code 19086
 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
 12 / 25 / 2011
Transaction ID : 3135627
 Amount of Each Receipt this Period
 250.00

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: (check only one) | PAGE 757 OF 2452 |
| | <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. Evelyn Vogt
Full Name (Last, First, Middle Initial)

Mailing Address 340 Gull Pt

City Benicia State CA Zip Code 94510

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 ▼ **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119124

Amount of Each Receipt this Period
100.00

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

Mailing Address 404 Kipling Rd

City Dummerston State VT Zip Code 05301

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 ▼ **278.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3135966

Amount of Each Receipt this Period
38.00

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

Mailing Address 1910 S State St Unit 211

City Chicago State IL Zip Code 60616

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

Name of Employer Infinium Capital Management Occupation Director

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
 12 / 04 / 2011
Transaction ID : 3119826

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **158.00**

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 758 OF 2452
(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. Melissa Wachocki
 Full Name (Last, First, Middle Initial)
 Mailing Address 23658 Hudson St
 City Dearborn State MI Zip Code 48124
 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
 12 / 26 / 2011
Transaction ID : 3135858
 Amount of Each Receipt this Period
 250.00

B. Ms. Lynn Wagman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1115 Prospect Avenue
 City Elkins Park State PA Zip Code 19027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Self
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 313.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2011
Transaction ID : 3130841
 Amount of Each Receipt this Period
 38.00

C. Ms. Molli Wagner
 Full Name (Last, First, Middle Initial)
 Mailing Address 1145 Crest Rd.
 City Del Mar State CA Zip Code 92014
 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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : 3134111
 Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 188.00
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 759 OF 2452 |
| | <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. Penny Wakefield
Full Name (Last, First, Middle Initial)

Mailing Address 1623 North Patrick Henry Drive

| | | |
|-------------------|-------------|-------------------|
| City Arlington | State VA | Zip Code 22205 |
|-------------------|-------------|-------------------|

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

| | |
|-------------------------|-------------------------------|
| Name of Employer n.a | Occupation attorney (retd) |
|-------------------------|-------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1650.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 13 | / | 2011 |

Transaction ID : 3126697

Amount of Each Receipt this Period
250.00

B. Ms. Penny Wakefield
Full Name (Last, First, Middle Initial)

Mailing Address 1623 North Patrick Henry Drive

| | | |
|-------------------|-------------|-------------------|
| City Arlington | State VA | Zip Code 22205 |
|-------------------|-------------|-------------------|

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

| | |
|-------------------------|-------------------------------|
| Name of Employer n.a | Occupation attorney (retd) |
|-------------------------|-------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1650.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2011 |

Transaction ID : 3139039

Amount of Each Receipt this Period
250.00

C. Ms. Stephanie A. Walker
Full Name (Last, First, Middle Initial)

Mailing Address 41820 North Drive

| | | |
|----------------|-------------|-------------------|
| City Canton | State MI | Zip Code 48188 |
|----------------|-------------|-------------------|

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

| | |
|--------------------------|-------------------------------|
| Name of Employer None | Occupation Retired teacher |
|--------------------------|-------------------------------|

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128987

Amount of Each Receipt this Period
25.00

| | |
|--|--------|
| 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 760 OF 2452 |
| | <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. Faye E. Walker | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2011 Transaction ID : 3126329 |
| Mailing Address 1528 Tulane St | | Amount of Each Receipt this Period 85.00 |
| City Houston | State TX | Zip Code 77008 |
| 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 ▼ 230.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Jacquie Walker | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 3129019 |
| Mailing Address 10 Jocholt Way | | Amount of Each Receipt this Period 20.00 |
| City Putney | State VT | Zip Code 05346 |
| 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 ▼ 240.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Daphne Wall | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2011 Transaction ID : 3119397 |
| Mailing Address PO Box 1116 | | Amount of Each Receipt this Period 35.00 |
| City North Conway | State NH | Zip Code 03860 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 425.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 85.00 |
| 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 761 OF 2452 |
| | <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. Maxine H. Wallin | | Date of Receipt 12 / 07 / 2011 Transaction ID : 3123336 |
| Mailing Address 7022 Tupa Cir. | | Amount of Each Receipt this Period 1000.00 |
| City Minneapolis | State MN | Zip Code 55439 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer REQUESTED | Occupation VOLUNTEER | |
| 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. Marilyn Walsh | | Date of Receipt 12 / 15 / 2011 Transaction ID : 3129301 |
| Mailing Address 18 Colony Cir | | Amount of Each Receipt this Period 50.00 |
| City Glastonbury | State CT | Zip Code 06033 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation retired | |
| 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. Ms. Diana Waltman | | Date of Receipt 12 / 15 / 2011 Transaction ID : 3129794 |
| Mailing Address 1 Ballantine Ln. | | Amount of Each Receipt this Period 115.00 |
| City Skillman | State NJ | Zip Code 08558 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 215.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1165.00 |
| 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 762 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Amy Wang
 Full Name (Last, First, Middle Initial)
 Mailing Address 232 Parish Rd
 City Worthington State MA Zip Code 01098
 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 ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119461
 Amount of Each Receipt this Period
 10.00

B. Ms. Patricia G. Ward
 Full Name (Last, First, Middle Initial)
 Mailing Address 412 Stanley Drive
 City Santa Barbara State CA Zip Code 93105
 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128730
 Amount of Each Receipt this Period
 20.00

C. Mrs. Charlotte R. Ward
 Full Name (Last, First, Middle Initial)
 Mailing Address 134 Norwood Ave.
 City Auburn State AL Zip Code 36830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Auburn University Occupation College Professor
 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
 12 / 28 / 2011
Transaction ID : 3135166
 Amount of Each Receipt this Period
 250.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 280.00 |
| 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 763 OF 2452
(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. Mildredan H. H. Ward
 Full Name (Last, First, Middle Initial)
 Mailing Address 1550 Toluca Drive
 City San Bernardino State CA Zip Code 92404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: retired Occupation: educator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 12 / 13 / 2011
Transaction ID : 3126763
 Amount of Each Receipt this Period: 25.00

B. Amy Ware
 Full Name (Last, First, Middle Initial)
 Mailing Address 4208 Armstrong Pkwy
 City Dallas State TX Zip Code 75205
 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: 12 / 09 / 2011
Transaction ID : 3125736
 Amount of Each Receipt this Period: 1000.00

C. 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: SDS Occupation: SW Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt: 12 / 20 / 2011
Transaction ID : 3133091
 Amount of Each Receipt this Period: 2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3525.00
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 764 OF 2452 |
| | <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. Ginny Warnes
Full Name (Last, First, Middle Initial)
Mailing Address 10 Val Mar Place

| | | |
|--------------------|-------------|-------------------|
| City San Carlos | State CA | Zip Code 94070 |
|--------------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : 3119439

Amount of Each Receipt this Period
50.00

B. Ms. Ginny Warnes
Full Name (Last, First, Middle Initial)
Mailing Address 10 Val Mar Place

| | | |
|--------------------|-------------|-------------------|
| City San Carlos | State CA | Zip Code 94070 |
|--------------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 19 | / | 2011 |

Transaction ID : 3132512

Amount of Each Receipt this Period
50.00

C. Mrs. Audrey T Warren
Full Name (Last, First, Middle Initial)
Mailing Address 511 Estates Dr.

| | | |
|--------------------|-------------|-------------------|
| City Sacramento | State CA | Zip Code 95864 |
|--------------------|-------------|-------------------|

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

| | |
|-------------------------------|-------------------------|
| Name of Employer REQUESTED | Occupation Homemaker |
|-------------------------------|-------------------------|

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 |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3134711

Amount of Each Receipt this Period
150.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 250.00 |
| 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 765 OF 2452 |
| | <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. Claudia Wasik | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 21 / 2011 |
| Mailing Address 1315 Kingwood St. | | | Transaction ID : 3133597 |
| City Ypsilanti | State MI | Zip Code 48197 | Amount of Each Receipt this Period 80.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Eastern Mich. University | Occupation Retired Professor | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 230.00 | | |

| | | | |
|---|-------------------------------------|-------------------|--|
| Full Name (Last, First, Middle Initial) B. Dr. Richard L Wasserman | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2011 |
| Mailing Address 7153 Lavendale Avenue | | | Transaction ID : 3137209 |
| City Dallas | State TX | Zip Code 75230 | Amount of Each Receipt this Period 1000.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer DallasAllergyImmunology | Occupation physician | | |
| 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. Christine Waternaux | | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2011 |
| Mailing Address 7164 N Mercer Spring Pl | | | Transaction ID : 3135814 |
| City Tucson | State AZ | Zip Code 85718 | Amount of Each Receipt this Period 50.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer n/a | Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 275.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1130.00 |
| 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 766 OF 2452 |
| | <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. Patricia Waterston
Full Name (Last, First, Middle Initial)
Mailing Address 5815 Princeton Ave NE
City Seattle State WA Zip Code 98105
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 ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 14 / 2011
Transaction ID : 3128173
Amount of Each Receipt this Period
35.00

B. Ms. Victoria E. Watkins
Full Name (Last, First, Middle Initial)
Mailing Address 159 Madison Ave., Apt. 7C Apt 7C
City New York State NY Zip Code 10016
FEC ID number of contributing federal political committee. **C**
Name of Employer PIRA Energy Group Occupation Energy Analyst
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
12 / 21 / 2011
Transaction ID : 3133596
Amount of Each Receipt this Period
130.00

C. Ms. Gretchen Watkins
Full Name (Last, First, Middle Initial)
Mailing Address 5395 S. Grant Street
City Littleton State CO Zip Code 80121
FEC ID number of contributing federal political committee. **C**
Name of Employer Watkins Realty, Inc. Occupation Real Estate Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 229.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 11 / 2011
Transaction ID : 3125882
Amount of Each Receipt this Period
25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 190.00 |
| 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 767 OF 2452 |
| | <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 D Watson
Full Name (Last, First, Middle Initial)
Mailing Address 1495 W. Pine Grove Road
City Pa Furnace State PA Zip Code 16865
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 ▼ 240.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3128976
Amount of Each Receipt this Period 200.00

B. Mr. Lars Watson
Full Name (Last, First, Middle Initial)
Mailing Address 1201 Hancock St., Apt. 225
City Port Townsend State WA Zip Code 98368
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 ▼ 325.00

Date of Receipt 12 / 08 / 2011
Transaction ID : 3123984
Amount of Each Receipt this Period 200.00

C. Ms. Mary C. Watson
Full Name (Last, First, Middle Initial)
Mailing Address 2801 Benton Blvd.
City Minneapolis State MN Zip Code 55416
FEC ID number of contributing federal political committee. **C**
Name of Employer ESL Tutor Occupation Volunteer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 28 / 2011
Transaction ID : 3135164
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 720.00
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 768 OF 2452
(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. Martha J. Watson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1209 Villa St.
 City Mountain View State CA Zip Code 94041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-employed Occupation Env. Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3137374
 Amount of Each Receipt this Period
 1000.00

B. Ms. Sally Warner W. Watts
 Full Name (Last, First, Middle Initial)
 Mailing Address 10508 Stable Ln
 City Potomac State MD Zip Code 20854
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011
Transaction ID : 3121592
 Amount of Each Receipt this Period
 100.00

C. Ms. Betty Waverly
 Full Name (Last, First, Middle Initial)
 Mailing Address 20112 Bayview Ave.
 City Newport Beach State CA Zip Code 92660
 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 ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131975
 Amount of Each Receipt this Period
 140.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1240.00
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 769 OF 2452
(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. Carol Anne Way Ph.D.

Mailing Address 7771 Healdsburg Ave #28

City State Zip Code
Sebastopol CA 95472

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

Name of Employer Occupation
Self Clinical Psychologis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3139084

Amount of Each Receipt this Period
50.00

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

Mailing Address 185 Union Ave Apt. 13

City State Zip Code
Campbell CA 95008

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 ▼
220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3139210

Amount of Each Receipt this Period
10.00

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

Mailing Address 3481 Janice Way

City State Zip Code
Palo Alto CA 94303

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

Name of Employer Occupation
Sequoia Union HS District writer/teacher/

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
 12 / 30 / 2011
Transaction ID : 3138588

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 360.00

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 770 OF 2452 |
| | <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. Rita P. Weathersby | | Date of Receipt |
| Mailing Address 312 Lincoln Avenue | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Portsmouth | NH | 03801 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3128629 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="240.00"/> |
| Name of Employer | Occupation | |
| University of NH | Professor (Retired) | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="240.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Mrs. Joan Webb | | Date of Receipt |
| Mailing Address PO Box 4213 | | <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Carmel By The Sea | CA | 93921 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3131849 |
| 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 | |
| n/a | Retired | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="2100.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Marcia D Weber | | Date of Receipt |
| Mailing Address 138 West Hill Terrace | | <input type="text" value="12"/> / <input type="text" value="28"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Painted Post | NY | 14870 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3137453 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="2500.00"/> |
| Name of Employer | Occupation | |
| Southern Tier Central Regional Plannin | Executive Director | |
| 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="3520.00"/> |
| 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 771 OF 2452 |
| | <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. Frederic Webster
Full Name (Last, First, Middle Initial)

Mailing Address 2626 E. Madison St. Apt. 3

City Seattle State WA Zip Code 98112

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 ▼ 201.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011

Transaction ID : 3121790

Amount of Each Receipt this Period
 36.00

B. Ms. Carole Wedl
Full Name (Last, First, Middle Initial)

Mailing Address 517 Westover Ln

City Pleasant Hill State CA Zip Code 94523

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

Name of Employer Cline Cellars Occupation hospitality

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 203.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011

Transaction ID : 3138165

Amount of Each Receipt this Period
 20.00

C. Dr. Connie J. Weeks
Full Name (Last, First, Middle Initial)

Mailing Address 19265 Braemore road

City Northridge State CA Zip Code 91326

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

Name of Employer Loyola Marymount University Occupation retired teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 17 / 2011

Transaction ID : 3130772

Amount of Each Receipt this Period
 25.00

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 81.00 |
| 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 772 OF 2452 |
| | <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. Dr. Connie J. Weeks
 Full Name (Last, First, Middle Initial)
 Mailing Address 19265 Braemore road
 City Northridge State CA Zip Code 91326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Loyola Marymount University Occupation retired teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2011
Transaction ID : 3135577
 Amount of Each Receipt this Period
 300.00

B. Dr. Alex. Weilenmann
 Full Name (Last, First, Middle Initial)
 Mailing Address 307. S. Dithridge Street Apt. 509
 City Pittsburgh State PA Zip Code 15213
 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 ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3124838
 Amount of Each Receipt this Period
 200.00

C. Dr. Alex. Weilenmann
 Full Name (Last, First, Middle Initial)
 Mailing Address 307. S. Dithridge Street Apt. 509
 City Pittsburgh State PA Zip Code 15213
 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 ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3127995
 Amount of Each Receipt this Period
 200.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 430.00 |
| 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 773 OF 2452 |
| | <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. Joanna K. Weinberg
Full Name (Last, First, Middle Initial)

Mailing Address 40 Oakvale Avenue

City Berkeley State CA Zip Code 94705

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

Name of Employer UUniversity of CA Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3133095

Amount of Each Receipt this Period
 100.00

B. Ms. Joanna K. Weinberg
Full Name (Last, First, Middle Initial)

Mailing Address 40 Oakvale Avenue

City Berkeley State CA Zip Code 94705

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

Name of Employer UUniversity of CA Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3133128

Amount of Each Receipt this Period
 10.00

C. Ms. Edna Weinel
Full Name (Last, First, Middle Initial)

Mailing Address 407 N. Main Street

City Columbia State IL Zip Code 62236

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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2011

Transaction ID : 3138607

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00

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 774 OF 2452 |
| | <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. Sharon L. Weiner
Full Name (Last, First, Middle Initial)
Mailing Address 7 Lynn Ct
City Morristown State NJ Zip Code 07960
FEC ID number of contributing federal political committee. **C**
Name of Employer Capitol Legislative Occupation Lobbyist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **300.00**

Date of Receipt **12 / 15 / 2011**
Transaction ID : 3128570
Amount of Each Receipt this Period **25.00**

B. Mrs. Diann L Weinman
Full Name (Last, First, Middle Initial)
Mailing Address 4310 NW 6th Drive
City Des Moines State IA Zip Code 50313
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 **313.00**

Date of Receipt **12 / 15 / 2011**
Transaction ID : 3129375
Amount of Each Receipt this Period **38.00**

C. Ms. Ilene Weinreb
Full Name (Last, First, Middle Initial)
Mailing Address 65 Hiller Drive
City Oakland State CA Zip Code 94618
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 **225.00**

Date of Receipt **12 / 14 / 2011**
Transaction ID : 3127997
Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **163.00**
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 775 OF 2452
(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. Eleanor Weinstock
 Full Name (Last, First, Middle Initial)
 Mailing Address 525 S Flagler Dr., Apt. 12C
 Apartment #12C
 City West Palm Beach State FL Zip Code 33401
 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 ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : 3123343
 Amount of Each Receipt this Period
 100.00

B. Ms. Eleanor Weinstock
 Full Name (Last, First, Middle Initial)
 Mailing Address 525 S Flagler Dr., Apt. 12C
 Apartment #12C
 City West Palm Beach State FL Zip Code 33401
 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 ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : 3134077
 Amount of Each Receipt this Period
 250.00

C. Mr. Jon Weintraub
 Full Name (Last, First, Middle Initial)
 Mailing Address 4821 Montgomery Lane
 #506
 City Bethesda State MD Zip Code 20814
 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3127185
 Amount of Each Receipt this Period
 500.00

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 776 OF 2452 |
| | <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. Judith S. Weis
Full Name (Last, First, Middle Initial)
Mailing Address 170 West End Ave. Apt. 12N
Apt. 12 N
City New York State NY Zip Code 10023
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 ▼ 275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011
Transaction ID : 3131909
Amount of Each Receipt this Period
100.00

B. Dr. Nancy L Weiss
Full Name (Last, First, Middle Initial)
Mailing Address 3264 Lonesome Mountain Rd.
City Charlottesville State VA Zip Code 22911
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 ▼ 215.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 21 / 2011
Transaction ID : 3133576
Amount of Each Receipt this Period
115.00

C. Ms. Miriam Weiss
Full Name (Last, First, Middle Initial)
Mailing Address 432 E Sidney Ave.
City Mount Vernon State NY Zip Code 10553
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 ▼ 240.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011
Transaction ID : 3132017
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 265.00
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 777 OF 2452
(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. Norman Weissman
 Full Name (Last, First, Middle Initial)
 Mailing Address 4836 Quarry Ln.
 City Cleveland State OH Zip Code 44143
 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
 12 / 19 / 2011
Transaction ID : 3132232
 Amount of Each Receipt this Period
 100.00

B. Mrs. Rhoda Weisz
 Full Name (Last, First, Middle Initial)
 Mailing Address 500 East Marylyn Avenue, #A-1
 City State College State PA Zip Code 16801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation Housewife
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3123956
 Amount of Each Receipt this Period
 200.00

C. Dr. Laura S. Welch
 Full Name (Last, First, Middle Initial)
 Mailing Address 7118 Cedar Ave
 City Takoma Park State MD Zip Code 20912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CPWR Occupation physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3119336
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
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 778 OF 2452
(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. Laura S. Welch
 Full Name (Last, First, Middle Initial)
 Mailing Address 7118 Cedar Ave
 City Takoma Park State MD Zip Code 20912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CPWR Occupation physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2011
Transaction ID : 3130776
 Amount of Each Receipt this Period
 100.00

B. Dr. Laura S. Welch
 Full Name (Last, First, Middle Initial)
 Mailing Address 7118 Cedar Ave
 City Takoma Park State MD Zip Code 20912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CPWR Occupation physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 605.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133098
 Amount of Each Receipt this Period
 20.00

C. Jamie Welch
 Full Name (Last, First, Middle Initial)
 Mailing Address 6842 Race Track Road
 City La grange State TX Zip Code 78945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Welch Veterinary Hospital Occupation Owner/partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1115.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 17 / 2011
Transaction ID : 3130775
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 370.00
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 779 OF 2452 |
| | <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. Emilie Welles
Full Name (Last, First, Middle Initial)

Mailing Address 80 Deaconess Rd Unit 230

| | | |
|-----------------|-------------|-------------------|
| City Concord | State MA | Zip Code 01742 |
|-----------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3134648

Amount of Each Receipt this Period
250.00

B. Ms. Mary Wells
Full Name (Last, First, Middle Initial)

Mailing Address 4245 Rose Hill Ave.

| | | |
|--------------------|-------------|-------------------|
| City Cincinnati | State OH | Zip Code 45229 |
|--------------------|-------------|-------------------|

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 ▼
300.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 20 | / | 2011 |

Transaction ID : 3133394

Amount of Each Receipt this Period
300.00

C. Ms. Dona F. Wells
Full Name (Last, First, Middle Initial)

Mailing Address 12213 Ledges Dr.

| | | |
|--------------------|-------------|-------------------|
| City Louisville | State KY | Zip Code 40243 |
|--------------------|-------------|-------------------|

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

| | |
|--|--------------------------|
| Name of Employer EMW Women's Clinic | Occupation Exec. Dir. |
|--|--------------------------|

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 |
| 12 | / | 22 | / | 2011 |

Transaction ID : 3134235

Amount of Each Receipt this Period
125.00

| | |
|--|--------|
| 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 780 OF 2452 |
| | <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. Donna Wells | | Date of Receipt |
| Mailing Address 16431 Trenton Road | | <input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Upperco | MD | 21155 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3119911 |
| Name of Employer | | Amount of Each Receipt this Period |
| REQUESTED | | <input type="text" value="30.00"/> |
| Occupation | | |
| 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. Ms. Kay Wells | | Date of Receipt |
| Mailing Address 106 Wisteria Circle | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Cloverdale | CA | 95425 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3129483 |
| Name of Employer | | Amount of Each Receipt this Period |
| REQUESTED | | <input type="text" value="25.00"/> |
| Occupation | | |
| 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) ▼ | | |

| | | |
|---|-------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Audrey Wennink | | Date of Receipt |
| Mailing Address 610 W. Briar Place | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code |
| Chicago | IL | 60657 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 3129449 |
| Name of Employer | | Amount of Each Receipt this Period |
| Cambridge Systematics | | <input type="text" value="30.00"/> |
| Occupation | | |
| transportation planner | | |
| Receipt For: | | Aggregate Year-to-Date ▼ |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | <input type="text" value="360.00"/> |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="85.00"/> |
| 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 781 OF 2452 |
| | <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. 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
 Wentworth Consulting, LLC Consultant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3137415
 Amount of Each Receipt this Period
 140.00

B. Ms. Dolores E. Wenzel
 Full Name (Last, First, Middle Initial)
 Mailing Address 2800 Kit Sierra Way
 City State Zip Code
 Carson City, NV 89706
 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 ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3128114
 Amount of Each Receipt this Period
 100.00

C. Ms. Christina Weppner
 Full Name (Last, First, Middle Initial)
 Mailing Address 127 West 82 St Apt 8C
 City State Zip Code
 New York NY 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 self architect
 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
 12 / 20 / 2011
Transaction ID : 3133236
 Amount of Each Receipt this Period
 250.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 490.00 |
| 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 782 OF 2452 |
| | <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. Carolyn L. Wesner
 Full Name (Last, First, Middle Initial)
 Mailing Address 2457 Pfeifle St.
 City State Zip Code
 Howell MI 48843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired State of Michigan Retired Systems Anal
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 302.11

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2011
Transaction ID : 3119848
 Amount of Each Receipt this Period
 30.00

B. Mrs. Carolyn L. Wesner
 Full Name (Last, First, Middle Initial)
 Mailing Address 2457 Pfeifle St.
 City State Zip Code
 Howell MI 48843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired State of Michigan Retired Systems Anal
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 302.11

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128257
 Amount of Each Receipt this Period
 45.00

C. Ms. Pearl S. West
 Full Name (Last, First, Middle Initial)
 Mailing Address 3731 Portsmouth Cir N
 City State Zip Code
 Stockton CA 95219
 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 ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128503
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 783 OF 2452 |
| | <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

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

Mailing Address 2901 E 24th Street

City minneapolis State MN Zip Code 55406

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 ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3132227

Amount of Each Receipt this Period
 65.00

B. Ms. Hazel Westly
Full Name (Last, First, Middle Initial)

Mailing Address 605 S Kentucky Ave #15 Apt. 15

City Granite Falls State WA Zip Code 98252

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 ▼ 312.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129291

Amount of Each Receipt this Period
 26.00

C. Ms. Ardis L. Wexler
Full Name (Last, First, Middle Initial)

Mailing Address 4913 Larkspur Lane

City Edina State MN Zip Code 55435

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 ▼ 235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3128856

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶ 106.00

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 784 OF 2452 |
| | (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. Deborah K. Wexler | | Date of Receipt |
| Mailing Address 1078 Forest Ave. | | <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2011"/> |
| City State Zip Code Palo Alto CA 94301 | | Transaction ID : 3133468 |
| 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) B. Ms. Faith E. Wheeler | | Date of Receipt |
| Mailing Address 818 Whittier Place NW | | <input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2011"/> |
| City State Zip Code Washington DC 20012 | | Transaction ID : 3122765 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period <input type="text" value="10.00"/> |
| Name of Employer Constituents | Occupation Advisory fNeighborho | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="240.00"/> | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Ms. Faith E. Wheeler | | Date of Receipt |
| Mailing Address 818 Whittier Place NW | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City State Zip Code Washington DC 20012 | | Transaction ID : 3135958 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period <input type="text" value="10.00"/> |
| Name of Employer Constituents | Occupation Advisory fNeighborho | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ <input type="text" value="240.00"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="320.00"/> |
| 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 785 OF 2452 |
| | <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. Ms. Wilma A A. Wheeler | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2011 Transaction ID : 3138212 |
| Mailing Address PO Box 3208 | | Amount of Each Receipt this Period 100.00 |
| City Mammoth Lakes | State CA | Zip Code 93546 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 |
| Name of Employer none | Occupation none | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 335.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Betty Joe Whitcomb | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2011 Transaction ID : 3119129 |
| Mailing Address 2624 Halibut Point Rd | | Amount of Each Receipt this Period 25.00 |
| City Sitka | State AK | Zip Code 99835 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 270.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Betty Joe Whitcomb | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2011 Transaction ID : 3119130 |
| Mailing Address 2624 Halibut Point Rd | | Amount of Each Receipt this Period 25.00 |
| City Sitka | State AK | Zip Code 99835 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 270.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 100.00 |
| 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 786 OF 2452 |
| | <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 White | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2011 |
| Mailing Address 111 West Cedar Ave | | Transaction ID : 3138571 |
| City Denver | State CO | Zip Code 80223 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Higher Education Resource Services | Occupation Executive Director | |
| 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) B. Mrs. Karen M. White | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 |
| Mailing Address 1334 Walnut Avenue | | Transaction ID : 3125869 |
| City Annapolis | State MD | Zip Code 21403 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 85.00 |
| Name of Employer NEA | Occupation Director | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1020.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Elise White | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2011 |
| Mailing Address 2600 Woolsey St. | | Transaction ID : 3131178 |
| City Berkeley | State CA | Zip Code 94705 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 20.00 |
| Name of Employer none | Occupation Retired bookseller | |
| 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).....▶ | 1105.00 |
| 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 787 OF 2452 |
| | <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 G. White | | Date of Receipt |
| Mailing Address 6100 Westchester Park Dr., Apt. 1417 | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City College Park | State MD | Zip Code 20740 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3134392 |
| Name of Employer Self | Occupation CPA | 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="125.00"/> |
| | <input type="text" value="350.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Pam White | | Date of Receipt |
| Mailing Address 10 Dakin Rd | | <input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2011"/> |
| City Sharon | State CT | Zip Code 06069 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3134241 |
| Name of Employer Self | Occupation Artist | 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="125.00"/> |
| | <input type="text" value="500.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Jane White-Lewis | | Date of Receipt |
| Mailing Address 29 Broad Street | | <input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2011"/> |
| City Guilford | State CT | Zip Code 06437 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 3133104 |
| Name of Employer Self | Occupation Psychologist | 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="350.00"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="500.00"/> |
| 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 788 OF 2452
(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. Jo Lynne Whiting
 Full Name (Last, First, Middle Initial)
 Mailing Address 2435 S. Lansing Way
 City Aurora State CO Zip Code 80014
 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 ▼ 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3130922
 Amount of Each Receipt this Period
 250.00

B. Ms. Lois Whitman
 Full Name (Last, First, Middle Initial)
 Mailing Address 285 Central park West
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Human Rights Watch Occupation Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3137357
 Amount of Each Receipt this Period
 100.00
 Tr to NF 1/11/12

C. Ms. Joan Whitman
 Full Name (Last, First, Middle Initial)
 Mailing Address 719 Majors Path
 City Southampton State NY Zip Code 11968
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Editor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133366
 Amount of Each Receipt this Period
 1000.00

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 789 OF 2452 |
| | <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. Grace Whitman | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2011 |
| Mailing Address PO Box 450 | | Transaction ID : 3137253 |
| City Barnesville | State MD | Zip Code 20838 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500.00 | |
| Name of Employer self-employed | Occupation psychotherapist | |
| 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) B. Ms. Margaret A. Whitney | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 |
| Mailing Address 601 West Mercer Place # 203 | | Transaction ID : 3135581 |
| City Seattle | State WA | Zip Code 98119 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 20.00 | |
| Name of Employer n/a | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 220.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Mrs. Billie L. Whittaker | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 |
| Mailing Address 1018 Lavender Place | | Transaction ID : 3128495 |
| City Hercules | State CA | Zip Code 94547 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25.00 | |
| Name of Employer none | Occupation none | |
| 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).....▶ | 95.00 |
| 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 790 OF 2452 |
| | <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. judith Wicks | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2011 |
| Mailing Address 332 s. 24th st. | | Transaction ID : 3133106 |
| City Philadelphia | State PA | Zip Code 19103 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer n/a | Occupation retired | Amount of Each Receipt this Period 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. Dr. Patricia R. Widmayer | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 |
| Mailing Address 1835 Ashland Ave. | | Transaction ID : 3135588 |
| City Evanston | State IL | Zip Code 60201 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer Widmayer & Associates, Inc. | Occupation Higher Education Con | Amount of Each Receipt this Period 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 700.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Jane Widseth | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 1108 Brians Way | | Transaction ID : 3131920 |
| City Wayne | State PA | Zip Code 19087 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer Haverford College | Occupation Psychologist | Amount of Each Receipt this Period 100.00 |
| 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).....▶ | 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 791 OF 2452
(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. Pat A. Wiedhopf
 Full Name (Last, First, Middle Initial)
 Mailing Address 7510 E Rio Verde Dr
 City Tucson State AZ Zip Code 85715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pima County, Arizona Occupation Special Staff Assist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011
Transaction ID : 3120089
 Amount of Each Receipt this Period
 1000.00

B. Mr. Richard Wielkiewicz
 Full Name (Last, First, Middle Initial)
 Mailing Address 1714 Boxwood Cir.
 City Saint Cloud State MN Zip Code 56303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer College of Saint Benedict Occupation Psychology Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133465
 Amount of Each Receipt this Period
 50.00

C. Chani Wiggins
 Full Name (Last, First, Middle Initial)
 Mailing Address 4141 South Four Mile Run Dr Apt. 403
 City Arlington State VA Zip Code 22204
 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
 12 / 07 / 2011
Transaction ID : 3123437
 Amount of Each Receipt this Period
 500.00

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 792 OF 2452 |
| | <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. Dr. Nancy G Wilds
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 Bangs Shore Rd.
 City Orrs Island State ME Zip Code 04066
 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 ▼ 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131824
 Amount of Each Receipt this Period
 300.00

B. Ms. Glenann Wilkerson
 Full Name (Last, First, Middle Initial)
 Mailing Address 19681 North Rim Drive
 City Surprise State AZ Zip Code 85374
 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 ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128638
 Amount of Each Receipt this Period
 20.00

C. Ms. Karen Wilkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 5402 E McKellips Rd., Lot 237
 City Mesa State AZ Zip Code 85215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Of MI Occupation Retired Teacher
 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
 12 / 30 / 2011
Transaction ID : 3135355
 Amount of Each Receipt this Period
 25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 345.00 |
| 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 793 OF 2452
(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 Willard
 Full Name (Last, First, Middle Initial)
 Mailing Address 72 Alpine Shores Rd.
 City State Zip Code
 Bryant Pond ME 04219
 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 ▼
 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2011
Transaction ID : 3125742
 Amount of Each Receipt this Period
 10.00

B. Ms. Nancy Willard
 Full Name (Last, First, Middle Initial)
 Mailing Address 72 Alpine Shores Rd.
 City State Zip Code
 Bryant Pond ME 04219
 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 ▼
 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2011
Transaction ID : 3135582
 Amount of Each Receipt this Period
 20.00

C. Ms. Shirley B. Willcox
 Full Name (Last, First, Middle Initial)
 Mailing Address 1115 Ashlar Village
 City State Zip Code
 Wallingford CT 06492
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 N/A N/A
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133246
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 794 OF 2452
(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. Agnes Williams

Mailing Address 6604 Cipriano Rd

City Lanham State MD Zip Code 20706

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 ▼ **916.12**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2011
Transaction ID : 3126461

Amount of Each Receipt this Period
220.12

Full Name (Last, First, Middle Initial)
B. Ms. Carmen J Williams

Mailing Address 704 Oxfordshire Ln

City Chapel Hill State NC Zip Code 27517

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

Name of Employer National Institute of Environmental He Occupation scientist

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
12 / 14 / 2011
Transaction ID : 3128085

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Mr. David Williams

Mailing Address 11692 Laurelwood Dr

City Studio City State CA Zip Code 91604

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 ▼ **315.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2011
Transaction ID : 3135714

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **300.12**

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 795 OF 2452 |
| | <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. Everett B. Williams
Full Name (Last, First, Middle Initial)
Mailing Address 530 Valley Rd Apt. 4A
City Upper Montclair State NJ Zip Code 07043
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 **600.00**

Date of Receipt **12 / 09 / 2011**
Transaction ID : 3126537
Amount of Each Receipt this Period **300.00**

B. Ms. Kathryn B. Williams
Full Name (Last, First, Middle Initial)
Mailing Address 3021 Lakeshore Drive
City Winston-Salem State NC Zip Code 27106
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Executive Coach
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1125.00**

Date of Receipt **12 / 21 / 2011**
Transaction ID : 3133933
Amount of Each Receipt this Period **1000.00**

C. Norris Williams
Full Name (Last, First, Middle Initial)
Mailing Address 2430 nw 38th ST
City Gainesville State FL Zip Code 32605
FEC ID number of contributing federal political committee. **C**
Name of Employer University of Florida Occupation biologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **430.00**

Date of Receipt **12 / 14 / 2011**
Transaction ID : 3128184
Amount of Each Receipt this Period **50.00**

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 796 OF 2452 |
| | <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. Donna D L. Williamson
 Full Name (Last, First, Middle Initial)
 Mailing Address 52 Nace Avenue
 City Piedmont State CA Zip Code 94611
 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 ▼ 204.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129431
 Amount of Each Receipt this Period
 17.00

B. Edward A. williamson
 Full Name (Last, First, Middle Initial)
 Mailing Address 521 Holland Avenue
 City philadelphia State MS Zip Code 39350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation lawyer
 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
 12 / 20 / 2011
Transaction ID : 3133110
 Amount of Each Receipt this Period
 250.00

C. Ms. Donna E. Willoughby
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 Lake Creek Rd.
 City Salmon State ID Zip Code 83467
 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 ▼ 231.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132169
 Amount of Each Receipt this Period
 25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 292.00 |
| 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 797 OF 2452
(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 B. Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 23638 Lyons Avenue Apt. 214
 City Newhall State CA Zip Code 91321
 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 ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 23 / 2011
Transaction ID : 3135631
 Amount of Each Receipt this Period
 25.00

B. Ms. Angene H. Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3424 Keithshire Way
 City Lexington State KY Zip Code 40503
 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 ▼ 230.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : 3135122
 Amount of Each Receipt this Period
 50.00

C. Ms. J. A. Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 4303 NE 52nd St
 City Vancouver State WA Zip Code 98661
 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 ▼ 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3121687
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00
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 798 OF 2452 |
| | <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. Aletta T. Wilson
Full Name (Last, First, Middle Initial)
Mailing Address P.O.Box 1088

| | | |
|----------------------|-------------|-------------------|
| City Mesilla Park | State NM | Zip Code 88047 |
|----------------------|-------------|-------------------|

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 ▼ **425.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 28 | / | 2011 |

Transaction ID : 3137722

Amount of Each Receipt this Period

| | | | | |
|--------------|-------|-------|-------|-------|
| 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 25.00 | | | | |

B. Ms. Joyce M M Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 3101 Glenview Avenue

| | | |
|----------------|-------------|-------------------|
| City Austin | State TX | Zip Code 78703 |
|----------------|-------------|-------------------|

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

| | |
|--------------------------|--------------------------------|
| Name of Employer NONE | Occupation retired educator |
|--------------------------|--------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3128633

Amount of Each Receipt this Period

| | | | | |
|--------------|-------|-------|-------|-------|
| 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 30.00 | | | | |

C. Mr. Graham Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 621 Keefer Place NW

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20010 |
|--------------------|-------------|-------------------|

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

| | |
|--------------------------------------|------------------------|
| Name of Employer Perkins Coie LLP | Occupation Attorney |
|--------------------------------------|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 29 | / | 2011 |

Transaction ID : 3138146

Amount of Each Receipt this Period

| | | | | |
|--------------|-------|-------|-------|-------|
| 75.00 | 75.00 | 75.00 | 75.00 | 75.00 |
| 20.00 | | | | |

| | |
|--|--------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 75.00 |
| 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 799 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Ms. Laurie J. J Wilson | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2011 Transaction ID : 3124761 |
| Mailing Address 175 West 12th Street | | Amount of Each Receipt this Period 200.00 |
| City New York | State NY | Zip Code 10011 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self | Occupation Psychoanalyst | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 620.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Mr. Jonathan Wilson | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2011 Transaction ID : 3126733 |
| Mailing Address 3289 Arundel on the Bay Road | | Amount of Each Receipt this Period 250.00 |
| City annapolis | State MD | Zip Code 21403 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer self | Occupation independent investor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 750.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Allyne Winderman | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 16 / 2011 Transaction ID : 3130796 |
| Mailing Address 3660 Shannon Rd | | Amount of Each Receipt this Period 250.00 |
| City Los Angeles | State CA | Zip Code 90027 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer City of West Hollywood | Occupation Architect | |
| 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).....▶ | 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: PAGE 800 OF 2452
(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. Robert F. Wing

Mailing Address 400 Lenappe Drive

City State Zip Code
Columbus OH 43214

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

Name of Employer Occupation
Ohio State University Astronomer

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
 12 / 20 / 2011

Transaction ID : 3133114

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Ms. Frances P Phillips Wingard

Mailing Address 8929 SW 40th Ave

City State Zip Code
Gainesville FL 32608

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

Name of Employer Occupation
Self Employed Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3133147

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Ms. Frances P Phillips Wingard

Mailing Address 8929 SW 40th Ave

City State Zip Code
Gainesville FL 32608

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

Name of Employer Occupation
Self Employed Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 25 / 2011

Transaction ID : 3135619

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 801 OF 2452
(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. Barry Winkler

Mailing Address 530 Hinman Ave

City State Zip Code
Evanston IL 60202

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

Name of Employer Occupation
retired civil engineer

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
12 / 20 / 2011
Transaction ID : 3133115

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Mr. Hugh B. Wire

Mailing Address 2617 Le Conte Ave

City State Zip Code
Berkeley CA 94709

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 ▼
400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2011
Transaction ID : 3135820

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. Mr. Robert F Wiseman

Mailing Address 155 Riverside Drive Apt. 2E

City State Zip Code
New York NY 10024

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

Name of Employer Occupation
n/a 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
12 / 28 / 2011
Transaction ID : 3137506

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 802 OF 2452 |
| | <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. Judith Wishnia
Full Name (Last, First, Middle Initial)
Mailing Address 3 Quincy Ct.
City Setauket State NY Zip Code 11733
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 **350.00**

Date of Receipt
12 / 20 / 2011
Transaction ID : 3133390
Amount of Each Receipt this Period
100.00

B. Hallie E. Wittenberg
Full Name (Last, First, Middle Initial)
Mailing Address 515 1/2 U St NW
City Washington State DC Zip Code 20001
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 **320.00**

Date of Receipt
12 / 13 / 2011
Transaction ID : 3127070
Amount of Each Receipt this Period
40.00

C. Mr. Robert J Wittevrongel
Full Name (Last, First, Middle Initial)
Mailing Address 25259 Fairhaven Rd.
City Chadwick State IL Zip Code 61014
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 **300.00**

Date of Receipt
12 / 19 / 2011
Transaction ID : 3132147
Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... **190.00**
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 803 OF 2452
(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. Mary E. Witzell

Mailing Address 2306 Caminito Mira

City San Diego State CA Zip Code 92107

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

Name of Employer Pacific View Real Estate Occupation Realtor

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
 12 / 15 / 2011
Transaction ID : 3129110

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Mrs. Joan P. Wohl

Mailing Address 1919 Chestnut St., Apt. 2109 Apt. 2109

City Philadelphia State PA Zip Code 19103

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 ▼ **475.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129817

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Ms. Agnes June Wolfe

Mailing Address 19645 SW 88th Place Rd. Rainbow Springs Estates

City Dunnellon State FL Zip Code 34432

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 ▼ **235.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3134504

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **160.00**

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 804 OF 2452 |
| | <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. Ann Wolfe
Full Name (Last, First, Middle Initial)

Mailing Address 18 North Chester

| | | |
|-------------------|-------------|-------------------|
| City Baltimore | State MD | Zip Code 21231 |
|-------------------|-------------|-------------------|

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

| | |
|--------------------------------------|--------------------------|
| Name of Employer Right Management | Occupation consultant |
|--------------------------------------|--------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | / | 12 | / | 2011 |

Transaction ID : 3126195

Amount of Each Receipt this Period
25.00

B. Bernard C. Wollmeringer
Full Name (Last, First, Middle Initial)

Mailing Address 32 Ledgewood Rd.

| | | |
|--------------------|-------------|-------------------|
| City Framingham | State MA | Zip Code 01701 |
|--------------------|-------------|-------------------|

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 |
| 12 | / | 16 | / | 2011 |

Transaction ID : 3131592

Amount of Each Receipt this Period
100.00

C. Ms. Shirley Wolverson
Full Name (Last, First, Middle Initial)

Mailing Address 4129A Hartford Street

| | | |
|---------------------|-------------|-------------------|
| City Saint Louis | State MO | Zip Code 63116 |
|---------------------|-------------|-------------------|

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

| | |
|------------------------------------|------------------------------------|
| Name of Employer St. Louis APCP | Occupation Air Pollution Specia |
|------------------------------------|------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12 | / | 17 | / | 2011 |

Transaction ID : 3130807

Amount of Each Receipt this Period
35.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 160.00 |
| 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 805 OF 2452 |
| | <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. Valerie Wood
Full Name (Last, First, Middle Initial)
Mailing Address 133 S Del Mar Ave
City San Gabriel State CA Zip Code 91776
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation School Nurse
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1050.00**

Date of Receipt **12 / 20 / 2011**
Transaction ID : 3133418
Amount of Each Receipt this Period **500.00**

B. Ms. Rega Wood
Full Name (Last, First, Middle Initial)
Mailing Address 3310 Thomas Dr.
City Palo Alto State CA Zip Code 94303
FEC ID number of contributing federal political committee. **C**
Name of Employer Stanford University Occupation Professor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **220.00**

Date of Receipt **12 / 20 / 2011**
Transaction ID : 3133200
Amount of Each Receipt this Period **20.00**

c. Ms. Cynthia Woolbright
Full Name (Last, First, Middle Initial)
Mailing Address 667 Midship Circle
City Webster State NY Zip Code 14580
FEC ID number of contributing federal political committee. **C**
Name of Employer The Woolbright Group Occupation Consultant
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1470.00**

Date of Receipt **12 / 21 / 2011**
Transaction ID : 3133981
Amount of Each Receipt this Period **85.00**

SUBTOTAL of Receipts This Page (optional)..... **605.00**
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 806 OF 2452 |
| | <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. Audrey Wreszin
Full Name (Last, First, Middle Initial)

Mailing Address 8105 Fellowship Road

City Basking Ridge State NJ Zip Code 07920

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 ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011

Transaction ID : 3125744

Amount of Each Receipt this Period
 200.00

B. Mrs. Jo Anne Wright
Full Name (Last, First, Middle Initial)

Mailing Address 821 N Foreman St Apt 222

City Vinita State OK Zip Code 74301

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

Name of Employer St. John;s Episcopal Occupation Priest

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
 12 / 15 / 2011

Transaction ID : 3128902

Amount of Each Receipt this Period
 25.00

C. Ms. Betty Wrigley
Full Name (Last, First, Middle Initial)

Mailing Address 1070 W Jefferson St.

City Franklin State IN Zip Code 46131

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 ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3132056

Amount of Each Receipt this Period
 125.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 350.00 |
| 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 807 OF 2452 |
| | <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 I. Yahr
 Full Name (Last, First, Middle Initial)
 Mailing Address 24 Dickens Court
 City Irvine State CA Zip Code 92617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NA Occupation none
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3128490
 Amount of Each Receipt this Period
 200.00

B. Ms. Phyllis Yarnold
 Full Name (Last, First, Middle Initial)
 Mailing Address 2412 Yorktown St., Apt. 280
 City Houston State TX Zip Code 77056
 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 ▼ 346.25

Date of Receipt
 12 / 19 / 2011
Transaction ID : 3132198
 Amount of Each Receipt this Period
 35.00

C. Ms. JoAnne Yates
 Full Name (Last, First, Middle Initial)
 Mailing Address 74 Garfield St
 City Watertown State MA Zip Code 02472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MIT Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 12 / 20 / 2011
Transaction ID : 3133167
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 555.00
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 808 OF 2452 |
| | <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. Margaret Yates
 Full Name (Last, First, Middle Initial)
 Mailing Address 13847 W Sunset Blvd.
 City Pacific Palisades State CA Zip Code 90272
 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
 12 / 16 / 2011
Transaction ID : 3131585
 Amount of Each Receipt this Period
 300.00

B. Ms. Yvonne Yaw
 Full Name (Last, First, Middle Initial)
 Mailing Address 89 Bishops Forest Dr.
 City Waltham State MA Zip Code 02452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bentley University Occupation college rofessor
 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
 12 / 19 / 2011
Transaction ID : 3132457
 Amount of Each Receipt this Period
 10.00

C. Ms. Ann Yeomans
 Full Name (Last, First, Middle Initial)
 Mailing Address 115 Winthrop Avenue
 City Quincy State MA Zip Code 02170
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129269
 Amount of Each Receipt this Period
 15.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 325.00 |
| 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 809 OF 2452 |
| | <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. Janice D. Yoder | | | Date of Receipt |
| Mailing Address 516 Delaware Ave | | | <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3128665 |
| Akron | OH | 44303 | 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 | | |
| University of Akron | College Professor | | |
| 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) ▼ | | | |

| | | | |
|--|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Mariann Younger | | | Date of Receipt |
| Mailing Address 2 Hunters Gate Dr. | | | <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3132191 |
| Findlay | OH | 45840 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="100.00"/> |
| Name of Employer | Occupation | | |
| n/a | retired | | |
| 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) ▼ | | | |

| | | | |
|--|-------------------------------------|----------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Nancy M Yttre | | | Date of Receipt |
| Mailing Address 13485 Burlawn Pkwy. | | | <input type="text" value="12"/> / <input type="text" value="27"/> / <input type="text" value="2011"/> |
| City | State | Zip Code | Transaction ID : 3134394 |
| Brookfield | WI | 53005 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="125.00"/> |
| Name of Employer | Occupation | | |
| none | teacher | | |
| 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="250.00"/> |
| 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 810 OF 2452 |
| | <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. Nancy G. Zak
Full Name (Last, First, Middle Initial)

Mailing Address 1058 Dornell Rd

City Ball Ground State GA Zip Code 30107

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

Name of Employer Self Occupation consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2011

Transaction ID : 3135684

Amount of Each Receipt this Period
 45.00

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

Mailing Address 8900 E Jefferson Ave., Apt. 11 #1129

City Detroit State MI Zip Code 48214

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

Name of Employer self Occupation self

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
 12 / 07 / 2011

Transaction ID : 3123367

Amount of Each Receipt this Period
 200.00

C. Ms. Bonita B. Zdrale
Full Name (Last, First, Middle Initial)

Mailing Address 1351 Silverwood Lane

City Neenah State WI Zip Code 54956

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 ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129278

Amount of Each Receipt this Period
 25.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 270.00 |
| 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 811 OF 2452
(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. Danell Sher Zeavin
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 Banbury Dr.
 City San Francisco State CA Zip Code 94132
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131504
 Amount of Each Receipt this Period
 300.00

B. Ms. Paula H. Zeitlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 Tarleton Road
 City Newton State MA Zip Code 02459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation musician, music teac
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3128880
 Amount of Each Receipt this Period
 20.00

C. Ms. Paula H. Zeitlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 Tarleton Road
 City Newton State MA Zip Code 02459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation musician, music teac
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011
Transaction ID : 3134240
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 340.00
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 812 OF 2452 |
| | <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. Ruth L. Zetlin
Full Name (Last, First, Middle Initial)

Mailing Address 11710 Old Georgetown Road, #14
#1401-East

City North Bethesda State MD Zip Code 20852

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

Name of Employer Thyden Gross and Callahan, LLP Occupation bookkeeper

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
12 / 29 / 2011

Transaction ID : 3138234

Amount of Each Receipt this Period
250.00

B. Ms. Cheryl Ziegenfuss
Full Name (Last, First, Middle Initial)

Mailing Address 1036 Woodland Dr.

City Sunbury State PA Zip Code 17801

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 ▼ 305.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2011

Transaction ID : 3131606

Amount of Each Receipt this Period
55.00

C. Mrs. Garnet G. Zielske
Full Name (Last, First, Middle Initial)

Mailing Address 2282 Via Espada

City Pleasanton State CA Zip Code 94566

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

Name of Employer Valley Care Health Systems Occupation R.N. Case Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 06 / 2011

Transaction ID : 3122815

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 335.00

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 813 OF 2452 |
| | <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. Diane L. Zimmerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 215 W 92nd St Apt 13A
 City New York State NY Zip Code 10025
 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
 12 / 20 / 2011
Transaction ID : 3133416
 Amount of Each Receipt this Period
 100.00

B. Ms. Patricia Zimmermann
 Full Name (Last, First, Middle Initial)
 Mailing Address 23416 Continental Way
 City Canyon Lake State CA Zip Code 92587
 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 ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : 3135238
 Amount of Each Receipt this Period
 140.00

C. Ms. Rosaleen Zlatunich
 Full Name (Last, First, Middle Initial)
 Mailing Address p.o.box1090
 City Aptos State CA Zip Code 95003
 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 ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3132438
 Amount of Each Receipt this Period
 100.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 340.00 |
| 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 814 OF 2452
(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. Lois Zoller
 Full Name (Last, First, Middle Initial)
 Mailing Address 1300 N. Lake Shore Dr. #35D
 City Chicago State IL Zip Code 60610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation investor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2011
Transaction ID : 3130819
 Amount of Each Receipt this Period
 100.00

B. Ms. Lois Zoller
 Full Name (Last, First, Middle Initial)
 Mailing Address 1300 N. Lake Shore Dr. #35D
 City Chicago State IL Zip Code 60610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation investor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2011
Transaction ID : 3130820
 Amount of Each Receipt this Period
 150.00

C. Ms. Arline Zuckerman
 Full Name (Last, First, Middle Initial)
 Mailing Address 11315 Victoria Ave.
 City Los Angeles State CA Zip Code 90066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Librarian
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3133378
 Amount of Each Receipt this Period
 140.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 390.00
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 815 OF 2452
(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. ActBlue

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 ▼
8.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 6132570

Amount of Each Receipt this Period
8.00

Total Cntrbs through Conduit 12/1/11-12/31/11

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

Mailing Address 31 Wilding Lane

City State Zip Code
Oakland CA 94618

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2011
Transaction ID : 3119719

Amount of Each Receipt this Period
5.00

Amy Klobuchar Earmark Contributions

Full Name (Last, First, Middle Initial)
C. Mr. Lawrence Bianco

Mailing Address PO Box 125, LP-209

City State Zip Code
Cornwall PA 17016

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011
Transaction ID : 3121302

Amount of Each Receipt this Period
100.00

Amy Klobuchar Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00

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

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 816 OF 2452 |
| | <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. Lois Chaffee
 Full Name (Last, First, Middle Initial)
 Mailing Address 248 East 7th Street
 City New York State NY Zip Code 10009
 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 ▼ 0.00

Date of Receipt
 12 / 16 / 2011
Transaction ID : 3130862
 Amount of Each Receipt this Period 25.00
 Amy Klobuchar Earmark Contributions

B. Ms. Doris P. Mielke
 Full Name (Last, First, Middle Initial)
 Mailing Address 990 Victoria Greens Blvd
 City Victoria State MN Zip Code 55386
 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 ▼ 0.00

Date of Receipt
 12 / 30 / 2011
Transaction ID : 3138474
 Amount of Each Receipt this Period 25.00
 Amy Klobuchar Earmark Contributions

C. Dr. Gino Crocetti
 Full Name (Last, First, Middle Initial)
 Mailing Address 652 w 163 st
 City new york State NY Zip Code 10032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer city & country school Occupation Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 21 / 2011
Transaction ID : 3133973
 Amount of Each Receipt this Period 20.00
 Amy Klobuchar Earmark Contributions

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 70.00 |
| 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 817 OF 2452 |
| | <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. Gino Crocetti
Full Name (Last, First, Middle Initial)
Mailing Address 652 w 163 st
City new york State NY Zip Code 10032
FEC ID number of contributing federal political committee. **C**
Name of Employer city & country school Occupation Teacher
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 21 / 2011**
Transaction ID : 3134172
Amount of Each Receipt this Period **20.00**
Amy Klobuchar Earmark Contributions

B. Ms. Serena S. Connelly
Full Name (Last, First, Middle Initial)
Mailing Address 3156 Brookhollow Drive
City Dallas State TX Zip Code 75234
FEC ID number of contributing federal political committee. **C**
Name of Employer Contran Corp. Occupation foundation executive
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 11 / 2011**
Transaction ID : 3125541
Amount of Each Receipt this Period **1000.00**
Amy Klobuchar Earmark Contributions

C. Ms. Marcia L Hoffer
Full Name (Last, First, Middle Initial)
Mailing Address 169 Mathewson Rd
City Barrington State RI Zip Code 02806
FEC ID number of contributing federal political committee. **C**
Name of Employer E H Ashley & Co Inc Occupation Executive
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 29 / 2011**
Transaction ID : 3137919
Amount of Each Receipt this Period **50.00**
Amy Klobuchar Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... **1070.00**
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 818 OF 2452 |
| | <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. Jane C Gilman
Full Name (Last, First, Middle Initial)
Mailing Address 140 Sewall Ave
City brookline State MA Zip Code 02446
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
12 / 09 / 2011
Transaction ID : 3125823
Amount of Each Receipt this Period 10.00
Amy Klobuchar Earmark Contributions

B. Ms. Eva K. Grove
Full Name (Last, First, Middle Initial)
Mailing Address 171 Main St #278
City Los Altos State CA Zip Code 94022
FEC ID number of contributing federal political committee. **C**
Name of Employer na Occupation homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
12 / 23 / 2011
Transaction ID : 3134291
Amount of Each Receipt this Period 500.00
Amy Klobuchar Earmark Contributions

C. Ms. Deborah Rand
Full Name (Last, First, Middle Initial)
Mailing Address 242 East 19 Street #11F
City New York State NY Zip Code 10003
FEC ID number of contributing federal political committee. **C**
Name of Employer NYC HPD Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
12 / 10 / 2011
Transaction ID : 3125815
Amount of Each Receipt this Period 50.00
Amy Klobuchar Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 560.00
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 819 OF 2452 (check only one) |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
EMILY's List

| | | | | | | | | | | | | |
|---|----------------------------------|--|-------|-------------|-------|---|-------------|----|--|----|--|------|
| Full Name (Last, First, Middle Initial) A. Ms. Marian Harris | | Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>23</td> <td></td> <td>2011</td> </tr> </table> | M M M | / | D D D | / | Y Y Y Y Y Y | 12 | | 23 | | 2011 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | |
| 12 | | 23 | | 2011 | | | | | | | | |
| Mailing Address 67-87 Booth St. | | Transaction ID : 3135451 | | | | | | | | | | |
| City Forest Hills | State NY | Zip Code 11375 | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 | | | | | | | | | | |
| Name of Employer REQUESTED | Occupation REQUESTED | Amy Klobuchar Earmark Contributions | | | | | | | | | | |
| 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. Mr. Gregory Durniak | | Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>07</td> <td></td> <td>2011</td> </tr> </table> | M M M | / | D D D | / | Y Y Y Y Y Y | 12 | | 07 | | 2011 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | |
| 12 | | 07 | | 2011 | | | | | | | | |
| Mailing Address 46-16 215th place 2D | | Transaction ID : 3123757 | | | | | | | | | | |
| City Bayside | State NY | Zip Code 11361 | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 | | | | | | | | | | |
| Name of Employer self | Occupation developer | Amy Klobuchar Earmark Contributions | | | | | | | | | | |
| 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. Ms. Joanne Lyman | | Date of Receipt <table border="1" style="width: 100%;"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>01</td> <td></td> <td>2011</td> </tr> </table> | M M M | / | D D D | / | Y Y Y Y Y Y | 12 | | 01 | | 2011 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | |
| 12 | | 01 | | 2011 | | | | | | | | |
| Mailing Address 163 East 81 St Street | | Transaction ID : 3119268 | | | | | | | | | | |
| City NYC | State NY | Zip Code 10028 | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 | | | | | | | | | | |
| Name of Employer self-employed | Occupation designer | Amy Klobuchar Earmark Contributions | | | | | | | | | | |
| 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).....▶ | 200.00 |
| 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 820 OF 2452 |
| | <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. Polly G. Cherner
Full Name (Last, First, Middle Initial)

Mailing Address 30 South Oak Ave

City San Anselmo State CA Zip Code 94960

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

Name of Employer Self-Employed Occupation Educator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
12 / 30 / 2011
Transaction ID : 3138598

Amount of Each Receipt this Period
500.00

Amy Klobuchar Earmark Contributions

B. Ms. Phyllis Moen
Full Name (Last, First, Middle Initial)

Mailing Address 325 W River Pkwy

City Minneapolis State MN Zip Code 55401

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

Name of Employer University of Minnesota Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
12 / 31 / 2011
Transaction ID : 3139072

Amount of Each Receipt this Period
100.00

Amy Klobuchar Earmark Contributions

C. Ms. Lynn B Rognstad
Full Name (Last, First, Middle Initial)

Mailing Address 415 Canby St

City Vermillion State SD Zip Code 57069

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

Name of Employer University of South Dakota Occupation higher ed administra

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
12 / 31 / 2011
Transaction ID : 3138994

Amount of Each Receipt this Period
50.00

Amy Klobuchar Earmark Contributions

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: | PAGE 821 OF 2452 |
| | (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. Babatope (Robert) AJAYI
 Full Name (Last, First, Middle Initial)
 Mailing Address 4501 NW 83RD STREET
 City KANSAS CITY State MO Zip Code 64151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WIRECO WORLDGROUP Occupation Information Technolo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 29 / 2011
Transaction ID : 3137747
 Amount of Each Receipt this Period 25.00
 Amy Klobuchar Earmark Contributions

B. Ms. Lillian P Davis
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 Boulder Rd
 City Plymouth Meeting State PA Zip Code 19462
 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 ▼ 0.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3131752
 Amount of Each Receipt this Period 5.00
 Ann Kirkpatrick Earmarked Contributions

C. Mr. Carl Duzen
 Full Name (Last, First, Middle Initial)
 Mailing Address 520 Kathmere Road
 City Havertown State PA Zip Code 19083
 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 ▼ 0.00

Date of Receipt 12 / 08 / 2011
Transaction ID : 3125077
 Amount of Each Receipt this Period 50.00
 Ann Kirkpatrick Earmarked Contributions

SUBTOTAL of Receipts This Page (optional).....▶ 80.00
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 822 OF 2452
(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. Elizabeth Niccolls
 Mailing Address 800 S 15th St Unit 1631
 City State Zip Code
 Sebring OH 44672
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131736
 Amount of Each Receipt this Period
 14.28
 Ann Kirkpatrick Earmarked Contributions

Full Name (Last, First, Middle Initial)
B. Ms. Cynthia A. Arnold
 Mailing Address PO Box 14473
 City State Zip Code
 San Francisco CA 94114
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131770
 Amount of Each Receipt this Period
 25.00
 Ann Kirkpatrick Earmarked Contributions

Full Name (Last, First, Middle Initial)
C. Ms. Martha Stampfer
 Mailing Address 7290 Sayre Drive
 City State Zip Code
 Oakland CA 94611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 U. California biologist
 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
 12 / 09 / 2011
Transaction ID : 3126587
 Amount of Each Receipt this Period
 20.00
 Ann Kirkpatrick Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 59.28
TOTAL This Period (last page this line 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 823 OF 2452 |
| | <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. Lillian P Davis
Full Name (Last, First, Middle Initial)

Mailing Address 108 Boulder Rd

City Plymouth Meeting State PA Zip Code 19462

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 ▼ 0.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3131748

Amount of Each Receipt this Period 5.00

Anne McLane Kuster Earmarked Cntrbs

B. Mr. Carl Duzen
Full Name (Last, First, Middle Initial)

Mailing Address 520 Kathmere Road

City Havertown State PA Zip Code 19083

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 ▼ 0.00

Date of Receipt 12 / 08 / 2011
Transaction ID : 3125072

Amount of Each Receipt this Period 50.00

Anne McLane Kuster Earmarked Cntrbs

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

Mailing Address 800 S 15th St Unit 1631

City Sebring State OH Zip Code 44672

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 ▼ 0.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3131731

Amount of Each Receipt this Period 14.29

Anne McLane Kuster Earmarked Cntrbs

SUBTOTAL of Receipts This Page (optional)..... ▶ 69.29

TOTAL This Period (last page this line 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 824 OF 2452 |
| | <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. Cynthia A. Arnold
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 14473
 City San Francisco State CA Zip Code 94114
 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 **0.00**

Date of Receipt **12 / 19 / 2011**
Transaction ID : 3131765
 Amount of Each Receipt this Period **25.00**
 Anne McLane Kuster Earmarked Cntrbs

B. Ms. Martha Stampfer
 Full Name (Last, First, Middle Initial)
 Mailing Address 7290 Sayre Drive
 City Oakland State CA Zip Code 94611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U. California Occupation biologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 09 / 2011**
Transaction ID : 3126582
 Amount of Each Receipt this Period **20.00**
 Anne McLane Kuster Earmarked Cntrbs

C. Ms. Lillian Soldat
 Full Name (Last, First, Middle Initial)
 Mailing Address 17100 Van Aken Blvd, Apt 402 Apt 402
 City Shaker Heights State OH Zip Code 44120
 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 **0.00**

Date of Receipt **12 / 29 / 2011**
Transaction ID : 3138095
 Amount of Each Receipt this Period **200.00**
 Betty Sutton Earmark Contributions

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 245.00 |
| 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 825 OF 2452 |
| | <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. Paula D. Sommer
Full Name (Last, First, Middle Initial)
Mailing Address 57 Ellis Dr
City Worcester State MA Zip Code 01609
FEC ID number of contributing federal political committee. **C**
Name of Employer Ceridian Occupation programmer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 0.00

Date of Receipt 12 / 31 / 2011
Transaction ID : 3139111
Amount of Each Receipt this Period 50.00
Betty Sutton Earmark Contributions

B. Ms. Marcia L Hoffer
Full Name (Last, First, Middle Initial)
Mailing Address 169 Mathewson Rd
City Barrington State RI Zip Code 02806
FEC ID number of contributing federal political committee. **C**
Name of Employer E H Ashley & Co Inc Occupation Executive
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 0.00

Date of Receipt 12 / 29 / 2011
Transaction ID : 3137917
Amount of Each Receipt this Period 25.00
Betty Sutton Earmark Contributions

C. Ms. Eva K. Grove
Full Name (Last, First, Middle Initial)
Mailing Address 171 Main St #278
City Los Altos State CA Zip Code 94022
FEC ID number of contributing federal political committee. **C**
Name of Employer na Occupation homemaker
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 0.00

Date of Receipt 12 / 23 / 2011
Transaction ID : 3134289
Amount of Each Receipt this Period 500.00
Betty Sutton Earmark Contributions

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 826 OF 2452 |
| | <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. Steven Richard | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 |
| Mailing Address 308 S. Holmes St. Apt.3 | | Transaction ID : 3135702 |
| City Lansing | State MI | Zip Code 48912 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25.00 | |
| Name of Employer PWAA | Occupation Inspector | Betty Sutton Earmark Contributions |
| 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. Ms. Marian Harris | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 |
| Mailing Address 67-87 Booth St. | | Transaction ID : 3135449 |
| City Forest Hills | State NY | Zip Code 11375 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50.00 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Betty Sutton Earmark Contributions |
| 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. Babatope (Robert) AJAYI | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2011 |
| Mailing Address 4501 NW 83RD STREET | | Transaction ID : 3137746 |
| City KANSAS CITY | State MO | Zip Code 64151 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25.00 | |
| Name of Employer WIRECO WORLDGROUP | Occupation Information Technolo | Betty Sutton Earmark Contributions |
| 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).....▶ | 100.00 |
| 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 827 OF 2452 |
| | <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. James Crawford
Full Name (Last, First, Middle Initial)
Mailing Address 5760 Citrus Ave
City Whittier State CA Zip Code 90601
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 **0.00**

Date of Receipt **12 / 01 / 2011**
Transaction ID : 3120181
Amount of Each Receipt this Period **20.00**
Cheri Bustos Earmarks

B. Ms. Phyllis Gardner
Full Name (Last, First, Middle Initial)
Mailing Address 406 Tennessee Glen Way
City Mill Valley State CA Zip Code 94941
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 **0.00**

Date of Receipt **12 / 02 / 2011**
Transaction ID : 3120256
Amount of Each Receipt this Period **10.00**
Cheri Bustos Earmarks

C. Ms. Joan Hubbell
Full Name (Last, First, Middle Initial)
Mailing Address 509 Aurora Ave Unit 420
City Naperville State IL Zip Code 60540
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 **0.00**

Date of Receipt **12 / 05 / 2011**
Transaction ID : 3123082
Amount of Each Receipt this Period **20.00**
Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... **50.00**
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 828 OF 2452 |
| | <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 Lyons
Full Name (Last, First, Middle Initial)
Mailing Address 36 Barkley Cir.
City Fort Myers State FL Zip Code 33907
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 0.00

Date of Receipt 12 / 05 / 2011
Transaction ID : 3123099
Amount of Each Receipt this Period 20.00
Cheri Bustos Earmarks

B. Ms. Beverlee Mitchell
Full Name (Last, First, Middle Initial)
Mailing Address 3012 West Hollywood Avenue
City Chicago State IL Zip Code 60659
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 0.00

Date of Receipt 12 / 06 / 2011
Transaction ID : 3123170
Amount of Each Receipt this Period 100.00
Cheri Bustos Earmarks

C. Ms. Joyce O. Newcomb
Full Name (Last, First, Middle Initial)
Mailing Address 5355 Pooks Hill Rd.
City Bethesda State MD Zip Code 20814
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 0.00

Date of Receipt 12 / 07 / 2011
Transaction ID : 3123424
Amount of Each Receipt this Period 20.00
Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
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 829 OF 2452 |
| | (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. Susan P. Nye
Full Name (Last, First, Middle Initial)

Mailing Address 671 Roxborough Avenue

City Philadelphia State PA Zip Code 19128

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 ▼ 0.00

Date of Receipt
 12 / 07 / 2011
Transaction ID : 3123493

Amount of Each Receipt this Period
 8.33

Cheri Bustos Earmarks

B. Mrs. Ruth Giese
Full Name (Last, First, Middle Initial)

Mailing Address 12 Asbury Avenue

City Binghamton State NY Zip Code 13901

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 ▼ 0.00

Date of Receipt
 12 / 08 / 2011
Transaction ID : 3125004

Amount of Each Receipt this Period
 25.00

Cheri Bustos Earmarks

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

Mailing Address 5235 E Fern Haven Ln.

City Anaheim State CA Zip Code 92807

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 ▼ 0.00

Date of Receipt
 12 / 08 / 2011
Transaction ID : 3125016

Amount of Each Receipt this Period
 20.00

Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 53.33

TOTAL This Period (last page this line 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 830 OF 2452
(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. Donna E. Willoughby
 Mailing Address 22 Lake Creek Rd.
 City State Zip Code
 Salmon ID 83467
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125047
 Amount of Each Receipt this Period
 50.00
 Cheri Bustos Earmarks

Full Name (Last, First, Middle Initial)
B. Ms. Christina D. Baker
 Mailing Address 1150 Willow Glen Way
 City State Zip Code
 San Jose CA 95125
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125059
 Amount of Each Receipt this Period
 50.00
 Cheri Bustos Earmarks

Full Name (Last, First, Middle Initial)
C. Mr. Paul Lerman
 Mailing Address 413 W Englewood Ave
 City State Zip Code
 Teaneck NJ 07666
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125061
 Amount of Each Receipt this Period
 100.00
 Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00
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 831 OF 2452 |
| | <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. Elizabeth Hale
Full Name (Last, First, Middle Initial)

Mailing Address 9529 SW 196th Avenue Rd

City State Zip Code
Dunnellon FL 34432

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 ▼
0.00

Date of Receipt
12 / 09 / 2011
Transaction ID : 3126563

Amount of Each Receipt this Period
50.00

Cheri Bustos Earmarks

B. Ms. Gail Silverstone
Full Name (Last, First, Middle Initial)

Mailing Address 6633 32 Place, NW
32nd Place, NW

City State Zip Code
Washington, DC 20015

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 ▼
0.00

Date of Receipt
12 / 09 / 2011
Transaction ID : 3126624

Amount of Each Receipt this Period
33.33

Cheri Bustos Earmarks

C. Ms. B. Kay Kinnear
Full Name (Last, First, Middle Initial)

Mailing Address 621B Idlewild Circle

City State Zip Code
Birmingham AL 35205

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 ▼
0.00

Date of Receipt
12 / 12 / 2011
Transaction ID : 3126829

Amount of Each Receipt this Period
100.00

Cheri Bustos Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 183.33 |
| TOTAL This Period (last page this line 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 832 OF 2452 |
| | <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. Emily Rauh Pulitzer
Full Name (Last, First, Middle Initial)

Mailing Address 4903 Pershing Pl.

City Saint Louis State MO Zip Code 63108

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011

Transaction ID : 3127081

Amount of Each Receipt this Period
 250.00

Cheri Bustos Earmarks

B. Mrs. Jane D. Ortel
Full Name (Last, First, Middle Initial)

Mailing Address 66 Silver Lake Ave.

City Wakefield State RI Zip Code 02879

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011

Transaction ID : 3127126

Amount of Each Receipt this Period
 100.00

Cheri Bustos Earmarks

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

Mailing Address 2 West 3rd Ave.

City Johnstown State NY Zip Code 12095

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129889

Amount of Each Receipt this Period
 50.00

Cheri Bustos Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 400.00 |
| 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 833 OF 2452 |
| | <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. Peg French
Full Name (Last, First, Middle Initial)
Mailing Address 544 Kemmerer Road
City State Zip Code
State College PA 16801
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 ▼
0.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129899
Amount of Each Receipt this Period
25.00
Cheri Bustos Earmarks

B. Mrs. Gloria M. Gray
Full Name (Last, First, Middle Initial)
Mailing Address 436 Crestover Circle
City State Zip Code
Richardson TX 75080
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 ▼
0.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129917
Amount of Each Receipt this Period
20.00
Cheri Bustos Earmarks

c. Ms. Sydney Story
Full Name (Last, First, Middle Initial)
Mailing Address 205 E Terrace Ave
City State Zip Code
Fresno CA 93704
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 ▼
0.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3131746
Amount of Each Receipt this Period
10.00
Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 834 OF 2452 |
| | (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. Rita Lepscier
Full Name (Last, First, Middle Initial)

Mailing Address 18511 Pine Lake Dr Apt 1

City State Zip Code
Tinley Park IL 60477

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 ▼
0.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3131759

Amount of Each Receipt this Period
10.00

Cheri Bustos Earmarks

B. Mr. Fred Martin
Full Name (Last, First, Middle Initial)

Mailing Address 55 Holmes Ranch Rd
PO Box 328

City State Zip Code
Philo CA 95466

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 ▼
0.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3131794

Amount of Each Receipt this Period
20.00

Cheri Bustos Earmarks

C. Mr. Bernard Shyffer
Full Name (Last, First, Middle Initial)

Mailing Address 4212 Palos Verdes Drive E

City State Zip Code
Rancho Pls. Vrd. CA 90275

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 ▼
0.00

Date of Receipt
12 / 20 / 2011
Transaction ID : 3132544

Amount of Each Receipt this Period
100.00

Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00

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 835 OF 2452 |
| | <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. Harriet S. S Growick
 Full Name (Last, First, Middle Initial)
 Mailing Address 3850 Washington Street #916
 #916
 City Hollywood State FL Zip Code 33021
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3132564
 Amount of Each Receipt this Period
 18.00
 Cheri Bustos Earmarks

B. Mr. Merle D. Borchers
 Full Name (Last, First, Middle Initial)
 Mailing Address 2346 78th Street E
 City Inver Grove State MN Zip Code 55076
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3139534
 Amount of Each Receipt this Period
 6.67
 Cheri Bustos Earmarks

C. Ms. Kathryn M. Macchi
 Full Name (Last, First, Middle Initial)
 Mailing Address 1003 E 44th Street
 City Austin State TX Zip Code 78751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 3M Occupation Computer Support
 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
 12 / 05 / 2011
Transaction ID : 3123087
 Amount of Each Receipt this Period
 10.00
 Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional).....▶ 34.67
TOTAL This Period (last page this line 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 836 OF 2452 |
| | <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

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

Mailing Address 1337 Derby St

City Berkeley State CA Zip Code 94702

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

Name of Employer Alameda Hospital Occupation RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 27 / 2011
Transaction ID : 3139512

Amount of Each Receipt this Period 8.33

Cheri Bustos Earmarks

B. Ms. Marybeth Webster
Full Name (Last, First, Middle Initial)

Mailing Address 2916 E Loma Alta DR

City Douglas State AZ Zip Code 85607

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

Name of Employer chiricauhua com health ctr Occupation ART TERAPIS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 06 / 2011
Transaction ID : 3123161

Amount of Each Receipt this Period 50.00

Cheri Bustos Earmarks

C. Ms. Judi Fishman
Full Name (Last, First, Middle Initial)

Mailing Address 923 W Webster Ave

City Chicago State IL Zip Code 60614

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

Name of Employer Federal Street Holdings Occupation REAL ESTATE EXEC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 27 / 2011
Transaction ID : 3139529

Amount of Each Receipt this Period 25.00

Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 83.33

TOTAL This Period (last page this line 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 837 OF 2452 |
| | <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. Gerrie Barclay
Full Name (Last, First, Middle Initial)

Mailing Address 32241 Southfield Road

City Birmingham State MI Zip Code 48025

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

Name of Employer Fitz Public Schls Occupation Bilingual Coordinator

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
 12 / 01 / 2011

Transaction ID : 3120214

Amount of Each Receipt this Period
 50.00

Cheri Bustos Earmarks

B. Mrs. Marianita Meyer
Full Name (Last, First, Middle Initial)

Mailing Address 425 Park Ave. South Apt. 18C

City New York State NY Zip Code 10016

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

Name of Employer Kreindler & Kreindler Occupation Legal Assistant

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
 12 / 27 / 2011

Transaction ID : 3139505

Amount of Each Receipt this Period
 33.33

Cheri Bustos Earmarks

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

Mailing Address 6757 Vermar Ter

City Eden Prairie State MN Zip Code 55346

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

Name of Employer maverick tech Occupation engineer

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
 12 / 02 / 2011

Transaction ID : 3120281

Amount of Each Receipt this Period
 10.00

Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 93.33

TOTAL This Period (last page this line 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 838 OF 2452 |
| | <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. Alice A. Kleinhans
Full Name (Last, First, Middle Initial)

Mailing Address 45 North St.

City Andover State MA Zip Code 01810

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

Name of Employer Merrimack Valley Occupation Lawyer

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
 12 / 05 / 2011

Transaction ID : 3122993

Amount of Each Receipt this Period
 100.00

Cheri Bustos Earmarks

B. Ms. Leslie H. Pierpont
Full Name (Last, First, Middle Initial)

Mailing Address 4157 ortega blvd

City Jacksonville State FL Zip Code 32210

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

Name of Employer Native and Uncommon Plants Occupation Requested

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
 12 / 14 / 2011

Transaction ID : 3127258

Amount of Each Receipt this Period
 10.00

Cheri Bustos Earmarks

C. Ms. Frances Y. Smith
Full Name (Last, First, Middle Initial)

Mailing Address 30667 Mystic Forest Drive

City Farmington Hill State MI Zip Code 48331

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

Name of Employer Oakland Comm. College Occupation Teacher

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
 12 / 08 / 2011

Transaction ID : 3125010

Amount of Each Receipt this Period
 16.66

Cheri Bustos Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 126.66 |
| 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: | PAGE 839 OF 2452 |
| | (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. Dr. Richard Schmelzer
Full Name (Last, First, Middle Initial)

Mailing Address 5114 Milward Drive

City Madison State WI Zip Code 53711

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

Name of Employer PPMG Occupation Physician

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
 12 / 12 / 2011

Transaction ID : 3127077

Amount of Each Receipt this Period
 30.00

Cheri Bustos Earmarks

B. Ms. Ruth Fredericks
Full Name (Last, First, Middle Initial)

Mailing Address 3 Peter Cooper Rd Apt. 14E

City New York State NY Zip Code 10010

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011

Transaction ID : 3120070

Amount of Each Receipt this Period
 10.00

Cheri Bustos Earmarks

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

Mailing Address 2321 Black Oak Way

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011

Transaction ID : 3120175

Amount of Each Receipt this Period
 5.00

Cheri Bustos Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 45.00 |
| 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 840 OF 2452
(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. Barbara D. Boggs

Mailing Address 101 W. 147th Street # 21E

City State Zip Code
New York NY 10039

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 ▼
0.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011
Transaction ID : 3120189

Amount of Each Receipt this Period
20.00

Cheri Bustos Earmarks

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

Mailing Address 287 W 5th St.

City State Zip Code
Deer Park NY 11729

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 ▼
0.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011
Transaction ID : 3120199

Amount of Each Receipt this Period
25.00

Cheri Bustos Earmarks

Full Name (Last, First, Middle Initial)
C. Ms. Joslen Letscher

Mailing Address 41120 Fox Run, Apt. T19

City State Zip Code
Novi MI 48377

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 ▼
0.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011
Transaction ID : 3120205

Amount of Each Receipt this Period
25.00

Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 841 OF 2452 |
| | <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. Peter Lemkin
Full Name (Last, First, Middle Initial)

Mailing Address 14825 Keeneland Circle

City North Potomac State MD Zip Code 20878

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011

Transaction ID : 3120220

Amount of Each Receipt this Period
 5.00

Cheri Bustos Earmarks

B. Mr. William Kornfeld
Full Name (Last, First, Middle Initial)

Mailing Address 1304 Bobbi Ct.

City Bowling Green State KY Zip Code 42103

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2011

Transaction ID : 3120238

Amount of Each Receipt this Period
 33.33

Cheri Bustos Earmarks

C. Ms. Carlyn Halde
Full Name (Last, First, Middle Initial)

Mailing Address 63 Park Hill Ave.

City San Francisco State CA Zip Code 94117

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2011

Transaction ID : 3120244

Amount of Each Receipt this Period
 50.00

Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 88.33

TOTAL This Period (last page this line 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 842 OF 2452 |
| | <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. N. Laura Middleton M.D.
Full Name (Last, First, Middle Initial)
Mailing Address 8 Windridge Rd.
City Essex Junction State VT Zip Code 05452
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 0.00

Date of Receipt 12 / 02 / 2011
Transaction ID : 3120250
Amount of Each Receipt this Period 83.33
Cheri Bustos Earmarks

B. Mr. Ken Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 965 Kelly Blvd
City Springfield State OR Zip Code 97477
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 0.00

Date of Receipt 12 / 02 / 2011
Transaction ID : 3120263
Amount of Each Receipt this Period 10.00
Cheri Bustos Earmarks

C. Ms. Shirley Bales
Full Name (Last, First, Middle Initial)
Mailing Address 1525 Althea Dr
City Houston State TX Zip Code 77018
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 0.00

Date of Receipt 12 / 02 / 2011
Transaction ID : 3120266
Amount of Each Receipt this Period 20.00
Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... **113.33**
TOTAL This Period (last page this line 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 843 OF 2452 |
| | <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. Isabel Labriola
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 10794

| | | |
|---------------------|-------------|-------------------|
| City Zephyr Cove | State NV | Zip Code 89448 |
|---------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 02 | / | 2011 |

Transaction ID : 3120271

Amount of Each Receipt this Period

| |
|-------|
| 20.00 |
|-------|

Cheri Bustos Earmarks

B. Ms. Harriette C. Buchanan
Full Name (Last, First, Middle Initial)
Mailing Address 194 Eastview Dr.

| | | |
|---------------|-------------|-------------------|
| City Boone | State NC | Zip Code 28607 |
|---------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 05 | / | 2011 |

Transaction ID : 3122999

Amount of Each Receipt this Period

| |
|-------|
| 20.00 |
|-------|

Cheri Bustos Earmarks

C. Ms. Judith Wilcox
Full Name (Last, First, Middle Initial)
Mailing Address 26988 Heatherford Dr., Apt. 3

| | | |
|--------------------|-------------|-------------------|
| City Perrysburg | State OH | Zip Code 43551 |
|--------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 05 | / | 2011 |

Transaction ID : 3123005

Amount of Each Receipt this Period

| |
|------|
| 6.66 |
|------|

Cheri Bustos Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 46.66 |
| 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 844 OF 2452 |
| | <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. Patricia S. Byard
Full Name (Last, First, Middle Initial)
Mailing Address 3615 Maidu Pl.
City Davis State CA Zip Code 95618
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 0.00

Date of Receipt 12 / 05 / 2011
Transaction ID : 3123011
Amount of Each Receipt this Period 100.00
Cheri Bustos Earmarks

B. Ms. Muriel I. Patterson
Full Name (Last, First, Middle Initial)
Mailing Address 900 Hill Street
City Broomfield State CO Zip Code 80023
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 0.00

Date of Receipt 12 / 05 / 2011
Transaction ID : 3123017
Amount of Each Receipt this Period 10.00
Cheri Bustos Earmarks

C. Mr. Michael Burt
Full Name (Last, First, Middle Initial)
Mailing Address 505 13th St. SE, Apt. 1
City Washington State DC Zip Code 20003
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 0.00

Date of Receipt 12 / 05 / 2011
Transaction ID : 3123023
Amount of Each Receipt this Period 100.00
Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... **210.00**
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 845 OF 2452 |
| | <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. M. J. McAdam
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Bird Bay Dr W
 City Venice State FL Zip Code 34285
 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 0.00

Date of Receipt
 12 / 05 / 2011
Transaction ID : 3123029
 Amount of Each Receipt this Period 20.00
 Cheri Bustos Earmarks

B. Ms. Barbara House
 Full Name (Last, First, Middle Initial)
 Mailing Address 699 Lost River Road
 City Mazama State WA Zip Code 98833
 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 0.00

Date of Receipt
 12 / 05 / 2011
Transaction ID : 3123041
 Amount of Each Receipt this Period 20.00
 Cheri Bustos Earmarks

C. Ms. Kim Sampson
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 604
 City Collinsville State IL Zip Code 62234
 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 0.00

Date of Receipt
 12 / 05 / 2011
Transaction ID : 3123053
 Amount of Each Receipt this Period 20.00
 Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 846 OF 2452 |
| | (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. John W. Bakhuls

Mailing Address 6 Scottsdale Way # 1

City State Zip Code
Novato CA 94947

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 ▼
0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123060

Amount of Each Receipt this Period
10.00

Cheri Bustos Earmarks

Full Name (Last, First, Middle Initial)
B. Ms. Eva Kelley

Mailing Address 760 N 2nd St., Apt. 18

City State Zip Code
Paragould AR 72450

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 ▼
0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123066

Amount of Each Receipt this Period
2.00

Cheri Bustos Earmarks

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

Mailing Address 301 Aden Ct.

City State Zip Code
Upper Marlboro MD 20774

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 ▼
0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123072

Amount of Each Receipt this Period
4.16

Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 16.16

TOTAL This Period (last page this line 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 847 OF 2452 |
| | <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. Pat Sibley
Full Name (Last, First, Middle Initial)

Mailing Address 118 SW 116th Street
Apt. D24

City Seattle State WA Zip Code 98146

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 ▼ 0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123093

Amount of Each Receipt this Period
2.00

Cheri Bustos Earmarks

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

Mailing Address 21415 33rd Ave.

City Bayside State NY Zip Code 11361

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 ▼ 0.00

Date of Receipt
12 / 06 / 2011
Transaction ID : 3123137

Amount of Each Receipt this Period
10.00

Cheri Bustos Earmarks

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

Mailing Address 1704 Shadford Rd.

City Ann Arbor State MI Zip Code 48104

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 ▼ 0.00

Date of Receipt
12 / 06 / 2011
Transaction ID : 3123147

Amount of Each Receipt this Period
25.00

Cheri Bustos Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 37.00 |
| 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 848 OF 2452 |
| | <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. Curtis J. Eaton
Full Name (Last, First, Middle Initial)

Mailing Address 622 Hall Blvd

City Mason State MI Zip Code 48854

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011

Transaction ID : 3123153

Amount of Each Receipt this Period
 20.00

Cheri Bustos Earmarks

B. Mr. Rowland Bell
Full Name (Last, First, Middle Initial)

Mailing Address 606 Fords Landing Way

City Alexandria State VA Zip Code 22314

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123418

Amount of Each Receipt this Period
 200.00

Cheri Bustos Earmarks

C. Mrs. Katherine Horowitz
Full Name (Last, First, Middle Initial)

Mailing Address 2173 Glenkirk Drive

City San Jose State CA Zip Code 95124

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123430

Amount of Each Receipt this Period
 20.00

Cheri Bustos Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 240.00 |
| 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 849 OF 2452 |
| | <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. Mr. Americo Garza
Full Name (Last, First, Middle Initial)

Mailing Address 8815 Tweedy Lane

City Downey State CA Zip Code 90240

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 ▼ 0.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123433

Amount of Each Receipt this Period
10.00

Cheri Bustos Earmarks

B. Ms. Betty Armstrong
Full Name (Last, First, Middle Initial)

Mailing Address 16221 SE 29th St

City Bellevue State WA Zip Code 98008

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 ▼ 0.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123461

Amount of Each Receipt this Period
16.66

Cheri Bustos Earmarks

C. Robert E. Laveine
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 412

City West Burlington State IA Zip Code 52655

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 ▼ 0.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123471

Amount of Each Receipt this Period
100.00

Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional).....▶ 126.66

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 850 OF 2452 |
| | <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. Joyce Goodman
Full Name (Last, First, Middle Initial)
Mailing Address 1140 5th Avenue

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10128 |
|------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 07 | / | 2011 |

Transaction ID : 3123477

Amount of Each Receipt this Period

| |
|--------|
| 100.00 |
|--------|

Cheri Bustos Earmarks

B. Ms. Betty L. Jucevic
Full Name (Last, First, Middle Initial)
Mailing Address 648 24th Place

| | | |
|-----------------------|-------------|-------------------|
| City Hermosa Beach | State CA | Zip Code 90254 |
|-----------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 08 | / | 2011 |

Transaction ID : 3125023

Amount of Each Receipt this Period

| |
|-------|
| 20.00 |
|-------|

Cheri Bustos Earmarks

C. Ms. Elsie Murray
Full Name (Last, First, Middle Initial)
Mailing Address 1429 Beulah Rd

| | | |
|--------------------|-------------|-------------------|
| City Pittsburgh | State PA | Zip Code 15235 |
|--------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 08 | / | 2011 |

Transaction ID : 3125033

Amount of Each Receipt this Period

| |
|-------|
| 25.00 |
|-------|

Cheri Bustos Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 145.00 |
| 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 851 OF 2452
(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. Sandra Carr
 Full Name (Last, First, Middle Initial)
 Mailing Address 2742 Bennett Ridge Rd.
 City Santa Rosa State CA Zip Code 95404
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125042
 Amount of Each Receipt this Period
 25.00
 Cheri Bustos Earmarks

B. Catheine O'Connor
 Full Name (Last, First, Middle Initial)
 Mailing Address 429 Josiah Bartlett Rd.
 City Concord State NH Zip Code 03301
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125053
 Amount of Each Receipt this Period
 3.33
 Cheri Bustos Earmarks

C. Mr. Carl Duzen
 Full Name (Last, First, Middle Initial)
 Mailing Address 520 Kathmere Road
 City Havertown State PA Zip Code 19083
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125071
 Amount of Each Receipt this Period
 50.00
 Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 78.33
TOTAL This Period (last page this line 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 852 OF 2452
(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. Richard Bloss

Mailing Address 2323 Simpson St.

City Evanston State IL Zip Code 60201

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 ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3126559

Amount of Each Receipt this Period
2.50

Cheri Bustos Earmarks

Full Name (Last, First, Middle Initial)
B. Ms. Joan Kowalski

Mailing Address 54275 Bradshaw DR

City New Baltimore State MI Zip Code 48047

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 ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3126568

Amount of Each Receipt this Period
8.33

Cheri Bustos Earmarks

Full Name (Last, First, Middle Initial)
C. Ms. Carole C. Allen

Mailing Address 180 Montana Drive

City Danville State CA Zip Code 94526

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 ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3126574

Amount of Each Receipt this Period
2.50

Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ **13.33**

TOTAL This Period (last page this line 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 853 OF 2452 |
| | (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. Betty S. Tunstall
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1091

City Black Canyon City State AZ Zip Code 85324

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011

Transaction ID : 3126593

Amount of Each Receipt this Period
 10.00

Cheri Bustos Earmarks

B. Ms. Laura Steele
Full Name (Last, First, Middle Initial)

Mailing Address 10509 Hutting Pl.

City Silver Spring State MD Zip Code 20902

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011

Transaction ID : 3126612

Amount of Each Receipt this Period
 20.00

Cheri Bustos Earmarks

C. Ms. Dorothea R. Crisp
Full Name (Last, First, Middle Initial)

Mailing Address 1245 SW Walking Wood

City Depoe Bay State OR Zip Code 97341

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011

Transaction ID : 3126618

Amount of Each Receipt this Period
 20.00

Cheri Bustos Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 50.00 |
| 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 854 OF 2452 |
| | <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. Neva Wall | | Date of Receipt 12 / 12 / 2011 Transaction ID : 3127075 |
| Mailing Address 150 Ashton Dr. | | Amount of Each Receipt this Period 25.00 |
| City Athens | State GA | Zip Code 30606 |
| FEC ID number of contributing federal political committee. C | | Cheri Bustos Earmarks |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Bernardo Hollman | | Date of Receipt 12 / 12 / 2011 Transaction ID : 3127090 |
| Mailing Address 10237 Autumnview Ln | | Amount of Each Receipt this Period 2.00 |
| City San Diego | State CA | Zip Code 92126 |
| FEC ID number of contributing federal political committee. C | | Cheri Bustos Earmarks |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Susan Dennehy | | Date of Receipt 12 / 12 / 2011 Transaction ID : 3127102 |
| Mailing Address 240 Central Park S. | | Amount of Each Receipt this Period 12.50 |
| City New York | State NY | Zip Code 10019 |
| FEC ID number of contributing federal political committee. C | | Cheri Bustos Earmarks |
| 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 ▼ 0.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 39.50 |
| TOTAL This Period (last page this line 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 855 OF 2452 |
| | <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. Mr. Peter Henning
Full Name (Last, First, Middle Initial)

Mailing Address 8485 Hunts Point Ln

City Hunts Point State WA Zip Code 98004

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011

Transaction ID : 3127137

Amount of Each Receipt this Period
 10.00

Cheri Bustos Earmarks

B. Ms. Carolyn Thomas
Full Name (Last, First, Middle Initial)

Mailing Address 7409 Flower Ave.

City Takoma Park State MD Zip Code 20912

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011

Transaction ID : 3127271

Amount of Each Receipt this Period
 25.00

Cheri Bustos Earmarks

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

Mailing Address 58 Grandview Ave.

City Kingston State NY Zip Code 12401

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129895

Amount of Each Receipt this Period
 10.00

Cheri Bustos Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 45.00 |
| 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 856 OF 2452 |
| | <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. Nancy Richards
 Full Name (Last, First, Middle Initial)
 Mailing Address 5207 Church Drive
 City Charleston State WV Zip Code 25306
 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 ▼ 0.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3129909
 Amount of Each Receipt this Period 20.00
 Cheri Bustos Earmarks

B. Ms. Charlotte Alexandre
 Full Name (Last, First, Middle Initial)
 Mailing Address 10345 Adams Pl
 City Thornton State CO Zip Code 80229
 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 ▼ 0.00

Date of Receipt
 12 / 19 / 2011
Transaction ID : 3131729
 Amount of Each Receipt this Period 10.00
 Cheri Bustos Earmarks

C. Mithlesh Prakash
 Full Name (Last, First, Middle Initial)
 Mailing Address 2665 Condor Cir
 City Corona State CA Zip Code 92882
 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 ▼ 0.00

Date of Receipt
 12 / 19 / 2011
Transaction ID : 3131757
 Amount of Each Receipt this Period 8.50
 Cheri Bustos Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 38.50 |
| TOTAL This Period (last page this line 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 857 OF 2452 |
| | (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. Mr. Barry S. Weyburn
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 388

City State Zip Code
Rock Hall MD 21661

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 ▼
0.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3131764

Amount of Each Receipt this Period
50.00

Cheri Bustos Earmarks

B. Ms. Louise Weschler
Full Name (Last, First, Middle Initial)

Mailing Address 161 Richdale Rd

City State Zip Code
Colts Neck NJ 07722

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 ▼
0.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3131782

Amount of Each Receipt this Period
25.00

Cheri Bustos Earmarks

C. Ms. Ellen M. Tirone
Full Name (Last, First, Middle Initial)

Mailing Address 12 Edendale Ln

City State Zip Code
Durham NH 03824

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 ▼
0.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3131788

Amount of Each Receipt this Period
10.00

Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

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 858 OF 2452 |
| | <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. Carl Weinberg
Full Name (Last, First, Middle Initial)

Mailing Address 42 Green Oaks Ct.

City Walnut Creek State CA Zip Code 94596

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3132547

Amount of Each Receipt this Period
 20.00

Cheri Bustos Earmarks

B. Ms. Judy Hunter
Full Name (Last, First, Middle Initial)

Mailing Address 3586 Indigo Pond Dr

City Palm Harbor State FL Zip Code 34685

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3132554

Amount of Each Receipt this Period
 1.67

Cheri Bustos Earmarks

C. Ms. Clair A. Sharpless
Full Name (Last, First, Middle Initial)

Mailing Address 1 Drumlin Rd.

City West Simsbury State CT Zip Code 6092

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

Name of Employer REQUESTED Occupation Homemaker

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
 12 / 20 / 2011

Transaction ID : 3132576

Amount of Each Receipt this Period
 100.00

Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 121.67

TOTAL This Period (last page this line 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 859 OF 2452 |
| | (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. Nancy Anderson
Full Name (Last, First, Middle Initial)

Mailing Address 245 N Vine St Apt 903

City State Zip Code
Salt Lake City UT 84103

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 ▼
0.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 21 / 2011

Transaction ID : 3133753

Amount of Each Receipt this Period
10.00

Cheri Bustos Earmarks

B. Mrs. Marian Ryan
Full Name (Last, First, Middle Initial)

Mailing Address 2460 Linette Ct

City State Zip Code
Yorktown Heights NY 10598

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 ▼
0.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2011

Transaction ID : 3133767

Amount of Each Receipt this Period
20.00

Cheri Bustos Earmarks

C. Ms. Natalie Grigg
Full Name (Last, First, Middle Initial)

Mailing Address 92 Lakeshore Road

City State Zip Code
Boxford MA 01921

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

Name of Employer Occupation
REQUESTED Housewife/farmer

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
12 / 27 / 2011

Transaction ID : 3139500

Amount of Each Receipt this Period
100.00

Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00

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 860 OF 2452
(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 Froman
 Full Name (Last, First, Middle Initial)
 Mailing Address 214 Parliament Dr.
 City Coraopolis State PA Zip Code 15108
 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 ▼ 0.00

Date of Receipt 12 / 27 / 2011
Transaction ID : 3139522
 Amount of Each Receipt this Period 20.00
 Cheri Bustos Earmarks

B. Mr. Michael Seligman
 Full Name (Last, First, Middle Initial)
 Mailing Address 2700 Exeter Pl.
 City Santa Barbara State CA Zip Code 93105
 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 ▼ 0.00

Date of Receipt 12 / 27 / 2011
Transaction ID : 3139525
 Amount of Each Receipt this Period 50.00
 Cheri Bustos Earmarks

C. Ms. Mary Niccolls
 Full Name (Last, First, Middle Initial)
 Mailing Address 1830 Garden Dr.
 City Medford State OR Zip Code 97504
 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 ▼ 0.00

Date of Receipt 12 / 27 / 2011
Transaction ID : 3139539
 Amount of Each Receipt this Period 40.00
 Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 861 OF 2452 |
| | (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. Rebecca M. Hecking
Full Name (Last, First, Middle Initial)

Mailing Address 106 Plum St.

City Greenville State PA Zip Code 16125

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011

Transaction ID : 3139553

Amount of Each Receipt this Period
 25.00

Cheri Bustos Earmarks

B. Ms. Katha D. Massey
Full Name (Last, First, Middle Initial)

Mailing Address 270 Victoria Street

City Commerce State GA Zip Code 30529

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

Name of Employer REQUESTED Occupation Librarian

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
 12 / 29 / 2011

Transaction ID : 3139558

Amount of Each Receipt this Period
 50.00

Cheri Bustos Earmarks

c. Ms. Colleen B. Dipaul
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 95

City Rector State PA Zip Code 15677

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011

Transaction ID : 3139564

Amount of Each Receipt this Period
 15.00

Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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 862 OF 2452 |
| | <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. Nessa Peters
Full Name (Last, First, Middle Initial)
Mailing Address 1010 cannn road
City silver spring State MD Zip Code 20904
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 ▼ 0.00

Date of Receipt 12 / 14 / 2011
Transaction ID : 3127265
Amount of Each Receipt this Period 20.00
Cheri Bustos Earmarks

B. Ms. Marciarose Shestack
Full Name (Last, First, Middle Initial)
Mailing Address 2201 Pennsylvania Avenue
City Philadelphia State PA Zip Code 19130
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation TV anchor journalist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3131776
Amount of Each Receipt this Period 16.67
Cheri Bustos Earmarks

C. Ms. Judith Rogovin
Full Name (Last, First, Middle Initial)
Mailing Address 4566 Forest Wood Trl
City Sarasota State FL Zip Code 34241
FEC ID number of contributing federal political committee. **C**
Name of Employer Saint Paul Public Schls Occupation Teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 20 / 2011
Transaction ID : 3132559
Amount of Each Receipt this Period 0.84
Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 37.51
TOTAL This Period (last page this line 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 863 OF 2452 |
| | <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. Mr. Andrew Carson
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 709
 City State Zip Code
 Wilson WY 83014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation mtn guide
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 01 / 2011
Transaction ID : 3120164
 Amount of Each Receipt this Period 10.00
 Cheri Bustos Earmarks

B. Mr. Phillip S. Berry
 Full Name (Last, First, Middle Initial)
 Mailing Address 4510 Canyon Road
 City State Zip Code
 Lafayette CA 94549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Lawyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 05 / 2011
Transaction ID : 3123032
 Amount of Each Receipt this Period 250.00
 Cheri Bustos Earmarks

C. Mrs. Janet Warner
 Full Name (Last, First, Middle Initial)
 Mailing Address 229 Fayette New Wilmington
 City State Zip Code
 New Wilmington PA 16142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 09 / 2011
Transaction ID : 3126602
 Amount of Each Receipt this Period 100.00
 Cheri Bustos Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 360.00 |
| 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 864 OF 2452 |
| | <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 Kalins Taylor
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 Riverside Dr.
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation cionsultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 12 / 2011
Transaction ID : 3127097
 Amount of Each Receipt this Period
 60.00
 Cheri Bustos Earmarks

B. Ms. Clairan Ferrono
 Full Name (Last, First, Middle Initial)
 Mailing Address 5432 S Dorchester Ave.
 City Chicago State IL Zip Code 60615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 27 / 2011
Transaction ID : 3139549
 Amount of Each Receipt this Period
 50.00
 Cheri Bustos Earmarks

C. Mr. Richard R. Gray
 Full Name (Last, First, Middle Initial)
 Mailing Address 131 Riverside Dr., 1-A
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 01 / 2011
Transaction ID : 3120158
 Amount of Each Receipt this Period
 50.00
 Cheri Bustos Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.00
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 865 OF 2452 |
| | <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. James Gartner
 Full Name (Last, First, Middle Initial)
 Mailing Address 78 Knapp ave apt b
 City Clifton State NJ Zip Code 07011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sika Corporation Occupation mail clerk
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 06 / 2011
Transaction ID : 3123168
 Amount of Each Receipt this Period 10.00
 Cheri Bustos Earmarks

B. Ms. Viviana Sanchez
 Full Name (Last, First, Middle Initial)
 Mailing Address 1119 19 th street
 City Bellingham State WA Zip Code 98225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St. Joseph Hospital Occupation Social Worker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 13 / 2011
Transaction ID : 3127131
 Amount of Each Receipt this Period 5.00
 Cheri Bustos Earmarks

C. Ms. Anne Campbell
 Full Name (Last, First, Middle Initial)
 Mailing Address 1210 Spruce Street
 City Philadelphia State PA Zip Code 19107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U of PA Occupation analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 12 / 2011
Transaction ID : 3127108
 Amount of Each Receipt this Period 150.00
 Cheri Bustos Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 165.00 |
| 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 866 OF 2452 |
| | <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. Martha Stampfer
 Full Name (Last, First, Middle Initial)
 Mailing Address 7290 Sayre Drive
 City Oakland State CA Zip Code 94611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U. California Occupation biologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 09 / 2011
Transaction ID : 3126580
 Amount of Each Receipt this Period 20.00
 Cheri Bustos Earmarks

B. Mary Louise Sejda
 Full Name (Last, First, Middle Initial)
 Mailing Address 6228 Forest Ave.
 City Hammond State IN Zip Code 46324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNIV OF CHICAGO HOSPITALS Occupation ASST DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 09 / 2011
Transaction ID : 3126599
 Amount of Each Receipt this Period 20.00
 Cheri Bustos Earmarks

C. Mr. Robert H. Schor
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Ambassador Drive
 City Rochester State NY Zip Code 14610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Pittsburgh Occupation Faculty
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 20 / 2011
Transaction ID : 3132572
 Amount of Each Receipt this Period 166.67
 Cheri Bustos Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 206.67 |
| TOTAL This Period (last page this line 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 867 OF 2452 |
| | <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. Lillian P Davis
Full Name (Last, First, Middle Initial)

Mailing Address 108 Boulder Rd

City Plymouth Meeting State PA Zip Code 19462

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3131751

Amount of Each Receipt this Period
 5.00

Christie Vilsack Earmarks

B. Mr. Carl Duzen
Full Name (Last, First, Middle Initial)

Mailing Address 520 Kathmere Road

City Havertown State PA Zip Code 19083

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011

Transaction ID : 3125075

Amount of Each Receipt this Period
 50.00

Christie Vilsack Earmarks

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

Mailing Address 800 S 15th St Unit 1631

City Sebring State OH Zip Code 44672

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3131734

Amount of Each Receipt this Period
 14.29

Christie Vilsack Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 69.29

TOTAL This Period (last page this line 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 868 OF 2452 |
| | <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. Cynthia A. Arnold
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 14473
 City San Francisco State CA Zip Code 94114
 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 **0.00**

Date of Receipt **12 / 19 / 2011**
Transaction ID : 3131768
 Amount of Each Receipt this Period **25.00**
 Christie Vilsack Earmarks

B. Ms. Martha Stampfer
 Full Name (Last, First, Middle Initial)
 Mailing Address 7290 Sayre Drive
 City Oakland State CA Zip Code 94611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U. California Occupation biologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 09 / 2011**
Transaction ID : 3126585
 Amount of Each Receipt this Period **20.00**
 Christie Vilsack Earmarks

C. Mr. James Crawford
 Full Name (Last, First, Middle Initial)
 Mailing Address 5760 Citrus Ave
 City Whittier State CA Zip Code 90601
 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 **0.00**

Date of Receipt **12 / 01 / 2011**
Transaction ID : 3120179
 Amount of Each Receipt this Period **20.00**
 Claire McCaskill Earmark Contributions

| | |
|---|--------------|
| SUBTOTAL of Receipts This Page (optional)..... | 65.00 |
| 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 869 OF 2452 |
| | <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. Phyllis Gardner
Full Name (Last, First, Middle Initial)
Mailing Address 406 Tennessee Glen Way
City Mill Valley State CA Zip Code 94941
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 ▼ 0.00

Date of Receipt 12 / 02 / 2011
Transaction ID : 3120254
Amount of Each Receipt this Period 10.00
Claire McCaskill Earmark Contributions

B. Ms. Vivian Hoffman
Full Name (Last, First, Middle Initial)
Mailing Address 1600 Augusta Dr. Apt. 513
City Houston State TX Zip Code 77024
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 ▼ 0.00

Date of Receipt 12 / 02 / 2011
Transaction ID : 3120274
Amount of Each Receipt this Period 8.00
Claire McCaskill Earmark Contributions

C. Ms. Joan Hubbell
Full Name (Last, First, Middle Initial)
Mailing Address 509 Aurora Ave Unit 420
City Naperville State IL Zip Code 60540
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 ▼ 0.00

Date of Receipt 12 / 05 / 2011
Transaction ID : 3123080
Amount of Each Receipt this Period 20.00
Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 38.00
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 870 OF 2452 |
| | <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. Mary Lyons
 Full Name (Last, First, Middle Initial)
 Mailing Address 36 Barkley Cir.
 City Fort Myers State FL Zip Code 33907
 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 **0.00**

Date of Receipt
 12 / 05 / 2011
Transaction ID : 3123097
 Amount of Each Receipt this Period
 20.00
 Claire McCaskill Earmark Contributions

B. Ms. Joyce O. Newcomb
 Full Name (Last, First, Middle Initial)
 Mailing Address 5355 Pooks Hill Rd.
 City Bethesda State MD Zip Code 20814
 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 **0.00**

Date of Receipt
 12 / 07 / 2011
Transaction ID : 3123422
 Amount of Each Receipt this Period
 20.00
 Claire McCaskill Earmark Contributions

C. Gylan Dickey
 Full Name (Last, First, Middle Initial)
 Mailing Address 805 Glen Oak Dr
 City Lebanon State OR Zip Code 97355
 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 **0.00**

Date of Receipt
 12 / 07 / 2011
Transaction ID : 3123454
 Amount of Each Receipt this Period
 10.00
 Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... **50.00**
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 871 OF 2452 |
| | (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. Mr. Jesse Perry
Full Name (Last, First, Middle Initial)

Mailing Address 3748 Oakes Drive

City State Zip Code
Hayward CA 94542

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 ▼
0.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123485

Amount of Each Receipt this Period
15.00

Claire McCaskill Earmark Contributions

B. Ms. Susan P. Nye
Full Name (Last, First, Middle Initial)

Mailing Address 671 Roxborough Avenue

City State Zip Code
Philadelphia PA 19128

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 ▼
0.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123491

Amount of Each Receipt this Period
8.33

Claire McCaskill Earmark Contributions

C. Mrs. Ruth Giese
Full Name (Last, First, Middle Initial)

Mailing Address 12 Asbury Avenue

City State Zip Code
Binghamton NY 13901

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 ▼
0.00

Date of Receipt
12 / 08 / 2011
Transaction ID : 3125002

Amount of Each Receipt this Period
25.00

Claire McCaskill Earmark Contributions

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 48.33 |
| TOTAL This Period (last page this line 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 872 OF 2452 |
| | (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

A. Ms. Mary Jefferson
Full Name (Last, First, Middle Initial)
Mailing Address 5235 E Fern Haven Ln.
City Anaheim State CA Zip Code 92807
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 0.00

Date of Receipt 12 / 08 / 2011
Transaction ID : 3125014
Amount of Each Receipt this Period 20.00
Claire McCaskill Earmark Contributions

B. Ms. Susan Townsend
Full Name (Last, First, Middle Initial)
Mailing Address 112 Thruston Boulevard E.
City Dayton State OH Zip Code 45409
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 0.00

Date of Receipt 12 / 08 / 2011
Transaction ID : 3125027
Amount of Each Receipt this Period 25.00
Claire McCaskill Earmark Contributions

C. Ms. Donna E. Willoughby
Full Name (Last, First, Middle Initial)
Mailing Address 22 Lake Creek Rd.
City Salmon State ID Zip Code 83467
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 0.00

Date of Receipt 12 / 08 / 2011
Transaction ID : 3125045
Amount of Each Receipt this Period 50.00
Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... **95.00**
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 873 OF 2452 (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"/> 17 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Christina D. Baker
Full Name (Last, First, Middle Initial)

Mailing Address 1150 Willow Glen Way

| | | |
|------------------|-------------|-------------------|
| City San Jose | State CA | Zip Code 95125 |
|------------------|-------------|-------------------|

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 ▼ **0.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 08 | / | 2011 |

Transaction ID : 3125057

Amount of Each Receipt this Period

| |
|-------|
| 50.00 |
|-------|

Claire McCaskill Earmark Contributions

B. Mr. Paul Lerman
Full Name (Last, First, Middle Initial)

Mailing Address 413 W Englewood Ave

| | | |
|-----------------|-------------|-------------------|
| City Teaneck | State NJ | Zip Code 07666 |
|-----------------|-------------|-------------------|

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 ▼ **0.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 08 | / | 2011 |

Transaction ID : 3125064

Amount of Each Receipt this Period

| |
|--------|
| 100.00 |
|--------|

Claire McCaskill Earmark Contributions

C. Ms. Gail Silverstone
Full Name (Last, First, Middle Initial)

Mailing Address 6633 32 Place, NW
32nd Place, NW

| | | |
|---------------------|-------------|-------------------|
| City Washington, | State DC | Zip Code 20015 |
|---------------------|-------------|-------------------|

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 ▼ **0.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 09 | / | 2011 |

Transaction ID : 3126622

Amount of Each Receipt this Period

| |
|-------|
| 33.33 |
|-------|

Claire McCaskill Earmark Contributions

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 183.33 |
| TOTAL This Period (last page this line 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 874 OF 2452 |
| | (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. B. Kay Kinnear

Mailing Address 621B Idlewild Circle

City Birmingham State AL Zip Code 35205

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011

Transaction ID : 3126830

Amount of Each Receipt this Period
 100.00

Claire McCaskill Earmark Contributions

Full Name (Last, First, Middle Initial)
B. Mrs. Jane D. Ortel

Mailing Address 66 Silver Lake Ave.

City Wakefield State RI Zip Code 02879

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011

Transaction ID : 3127124

Amount of Each Receipt this Period
 100.00

Claire McCaskill Earmark Contributions

Full Name (Last, First, Middle Initial)
C. Ms. Marianne Bayley

Mailing Address 7501 Cumberland Rd., # 26

City Seminole State FL Zip Code 33777

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011

Transaction ID : 3127140

Amount of Each Receipt this Period
 20.00

Claire McCaskill Earmark Contributions

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 220.00 |
| 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 875 OF 2452 |
| | <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. Rosemarie Sheperd
Full Name (Last, First, Middle Initial)
Mailing Address 2 West 3rd Ave.
City Johnstown State NY Zip Code 12095
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 0.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129887
Amount of Each Receipt this Period 50.00
Claire McCaskill Earmark Contributions

B. Mrs. Peg French
Full Name (Last, First, Middle Initial)
Mailing Address 544 Kemmerer Road
City State College State PA Zip Code 16801
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 0.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129904
Amount of Each Receipt this Period 25.00
Claire McCaskill Earmark Contributions

C. Mrs. Gloria M. Gray
Full Name (Last, First, Middle Initial)
Mailing Address 436 Crestover Circle
City Richardson State TX Zip Code 75080
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 0.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129915
Amount of Each Receipt this Period 20.00
Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... **95.00**
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 876 OF 2452 |
| | <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. Sydney Story
Full Name (Last, First, Middle Initial)

Mailing Address 205 E Terrace Ave

City Fresno State CA Zip Code 93704

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 ▼ 0.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3131743

Amount of Each Receipt this Period 10.00

Claire McCaskill Earmark Contributions

B. Mr. Fred Martin
Full Name (Last, First, Middle Initial)

Mailing Address 55 Holmes Ranch Rd
PO Box 328

City Philo State CA Zip Code 95466

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 ▼ 0.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3131792

Amount of Each Receipt this Period 20.00

Claire McCaskill Earmark Contributions

C. Ms. Sally S. Levinson
Full Name (Last, First, Middle Initial)

Mailing Address 2985 Pacific Avenue
Apt. 8

City San Francisco State CA Zip Code 94115

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 ▼ 0.00

Date of Receipt 12 / 20 / 2011
Transaction ID : 3132537

Amount of Each Receipt this Period 25.00

Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00

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 877 OF 2452 |
| | <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. Bernard Shyffer
Full Name (Last, First, Middle Initial)

Mailing Address 4212 Palos Verdes Drive E

City Rancho Pls. Vrd. State CA Zip Code 90275

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 ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3132543

Amount of Each Receipt this Period
 100.00

Claire McCaskill Earmark Contributions

B. Mr. Merle D. Borchers
Full Name (Last, First, Middle Initial)

Mailing Address 2346 78th Street E

City Inver Grove State MN Zip Code 55076

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 ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011

Transaction ID : 3139535

Amount of Each Receipt this Period
 6.67

Claire McCaskill Earmark Contributions

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

Mailing Address 1337 Derby St

City Berkeley State CA Zip Code 94702

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

Name of Employer Alameda Hospital Occupation RN

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
 12 / 27 / 2011

Transaction ID : 3139513

Amount of Each Receipt this Period
 8.33

Claire McCaskill Earmark Contributions

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 115.00 |
| 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 878 OF 2452 |
| | <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. Marybeth Webster
 Full Name (Last, First, Middle Initial)
 Mailing Address 2916 E Loma Alta DR
 City Douglas State AZ Zip Code 85607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer chiricauhua.com health ctr Occupation ART THERAPIS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 06 / 2011**
Transaction ID : 3123159
 Amount of Each Receipt this Period **50.00**
 Claire McCaskill Earmark Contributions

B. Ms. Judi Fishman
 Full Name (Last, First, Middle Initial)
 Mailing Address 923 W Webster Ave
 City Chicago State IL Zip Code 60614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Federal Street Holdings Occupation REAL ESTATE EXEC
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 27 / 2011**
Transaction ID : 3139527
 Amount of Each Receipt this Period **25.00**
 Claire McCaskill Earmark Contributions

C. Ms. Gerrie Barclay
 Full Name (Last, First, Middle Initial)
 Mailing Address 32241 Southfield Road
 City Birmingham State MI Zip Code 48025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Fitz Public Schls Occupation Bilingual Coordinator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 01 / 2011**
Transaction ID : 3120212
 Amount of Each Receipt this Period **50.00**
 Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... **125.00**
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 879 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Mrs. Marianita Meyer | | Date of Receipt 12 / 27 / 2011 Transaction ID : 3139504 |
| Mailing Address 425 Park Ave. South Apt. 18C | | Amount of Each Receipt this Period 33.34 Claire McCaskill Earmark Contributions |
| City New York | State NY | Zip Code 10016 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Kreindler & Kreindler | Occupation Legal Assistant | |
| 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. Ms. Carol Emerson | | Date of Receipt 12 / 08 / 2011 Transaction ID : 3125026 |
| Mailing Address 50 Vista Verde Way | | Amount of Each Receipt this Period 50.00 Claire McCaskill Earmark Contributions |
| City Edgewood | State NM | Zip Code 87015 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Lovelace Resp. Res. Inst. | Occupation Veterinarian | |
| 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. Sergei Kouznetsov | | Date of Receipt 12 / 02 / 2011 Transaction ID : 3120279 |
| Mailing Address 6757 Vermar Ter | | Amount of Each Receipt this Period 10.00 Claire McCaskill Earmark Contributions |
| City Eden Prairie | State MN | Zip Code 55346 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer maverick tech | Occupation engineer | |
| 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).....▶ | 93.34 |
| TOTAL This Period (last page this line 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 880 OF 2452 |
| | <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. Alice A. Kleinhans
Full Name (Last, First, Middle Initial)

Mailing Address 45 North St.

City Andover State MA Zip Code 01810

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

Name of Employer Merrimack Valley Occupation Lawyer

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
 12 / 05 / 2011

Transaction ID : 3122991

Amount of Each Receipt this Period
 100.00

Claire McCaskill Earmark Contributions

B. Ms. Leslie H. Pierpont
Full Name (Last, First, Middle Initial)

Mailing Address 4157 ortega blvd

City Jacksonville State FL Zip Code 32210

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

Name of Employer Native and Uncommon Plants Occupation Requested

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
 12 / 14 / 2011

Transaction ID : 3127255

Amount of Each Receipt this Period
 10.00

Claire McCaskill Earmark Contributions

C. Ms. Diane Steets
Full Name (Last, First, Middle Initial)

Mailing Address 75 Pemberton Aveue

City Oceanport State NJ Zip Code 07757

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

Name of Employer None Occupation Retired Educator

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
 12 / 05 / 2011

Transaction ID : 3123101

Amount of Each Receipt this Period
 5.00

Claire McCaskill Earmark Contributions

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 115.00 |
| 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 881 OF 2452 |
| | <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 Y. Smith
Full Name (Last, First, Middle Initial)

Mailing Address 30667 Mystic Forest Drive

City Farmington Hill State MI Zip Code 48331

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

Name of Employer Oakland Comm. College Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 08 / 2011
Transaction ID : 3125008

Amount of Each Receipt this Period 16.66

Claire McCaskill Earmark Contributions

B. Ms. Ruth Fredericks
Full Name (Last, First, Middle Initial)

Mailing Address 3 Peter Cooper Rd Apt. 14E

City New York State NY Zip Code 10010

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 ▼ 0.00

Date of Receipt 12 / 01 / 2011
Transaction ID : 3120068

Amount of Each Receipt this Period 10.00

Claire McCaskill Earmark Contributions

C. Ms. Helen Gallew
Full Name (Last, First, Middle Initial)

Mailing Address 123 E. 4th Street

City Lansdale State PA Zip Code 19446

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 ▼ 0.00

Date of Receipt 12 / 01 / 2011
Transaction ID : 3120150

Amount of Each Receipt this Period 25.00

Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 51.66

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 882 OF 2452 |
| | <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. Marcia Roseman
Full Name (Last, First, Middle Initial)
Mailing Address 6318 Warrens Way
City Wanaque State NJ Zip Code 07465
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 0.00

Date of Receipt 12 / 01 / 2011
Transaction ID : 3120169
Amount of Each Receipt this Period 20.00
Claire McCaskill Earmark Contributions

B. Eleanor Robison
Full Name (Last, First, Middle Initial)
Mailing Address 2321 Black Oak Way
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 0.00

Date of Receipt 12 / 01 / 2011
Transaction ID : 3120173
Amount of Each Receipt this Period 5.00
Claire McCaskill Earmark Contributions

C. Ms. Barbara D. Boggs
Full Name (Last, First, Middle Initial)
Mailing Address 101 W. 147th Street # 21E
City New York State NY Zip Code 10039
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 0.00

Date of Receipt 12 / 01 / 2011
Transaction ID : 3120187
Amount of Each Receipt this Period 20.00
Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... **45.00**
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 883 OF 2452 |
| | (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. Susan Oleshko
Full Name (Last, First, Middle Initial)
Mailing Address 287 W 5th St.
City Deer Park State NY Zip Code 11729
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 ▼ 0.00

Date of Receipt
12 / 01 / 2011
Transaction ID : 3120197
Amount of Each Receipt this Period 25.00
Claire McCaskill Earmark Contributions

B. Ms. Joslen Letscher
Full Name (Last, First, Middle Initial)
Mailing Address 41120 Fox Run, Apt. T19
City Novi State MI Zip Code 48377
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 ▼ 0.00

Date of Receipt
12 / 01 / 2011
Transaction ID : 3120203
Amount of Each Receipt this Period 25.00
Claire McCaskill Earmark Contributions

C. R Masty
Full Name (Last, First, Middle Initial)
Mailing Address 975 Holly St.
City Bullhead City State AZ Zip Code 86442
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 ▼ 0.00

Date of Receipt
12 / 01 / 2011
Transaction ID : 3120209
Amount of Each Receipt this Period 10.00
Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 884 OF 2452 |
| | <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. Peter Lemkin | | Date of Receipt 12 / 01 / 2011 Transaction ID : 3120218 |
| Mailing Address 14825 Keeneland Circle | | Amount of Each Receipt this Period 5.00 |
| City North Potomac | State MD | Zip Code 20878 |
| FEC ID number of contributing federal political committee. C | | Claire McCaskill Earmark Contributions |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr. William Kornfeld | | Date of Receipt 12 / 02 / 2011 Transaction ID : 3120236 |
| Mailing Address 1304 Bobbi Ct. | | Amount of Each Receipt this Period 33.33 |
| City Bowling Green | State KY | Zip Code 42103 |
| FEC ID number of contributing federal political committee. C | | Claire McCaskill Earmark Contributions |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Carlyn Halde | | Date of Receipt 12 / 02 / 2011 Transaction ID : 3120242 |
| Mailing Address 63 Park Hill Ave. | | Amount of Each Receipt this Period 50.00 |
| City San Francisco | State CA | Zip Code 94117 |
| FEC ID number of contributing federal political committee. C | | Claire McCaskill Earmark Contributions |
| 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 ▼ 0.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 88.33 |
| TOTAL This Period (last page this line 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 885 OF 2452 |
| | (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. N. Laura Middleton M.D.
Full Name (Last, First, Middle Initial)
Mailing Address 8 Windridge Rd.
City Essex Junction State VT Zip Code 05452
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 ▼ 0.00

Date of Receipt 12 / 02 / 2011
Transaction ID : 3120248
Amount of Each Receipt this Period 83.33
Claire McCaskill Earmark Contributions

B. Mr. Ken Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 965 Kelly Blvd
City Springfield State OR Zip Code 97477
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 ▼ 0.00

Date of Receipt 12 / 02 / 2011
Transaction ID : 3120260
Amount of Each Receipt this Period 10.00
Claire McCaskill Earmark Contributions

C. Ms. Isabel Labriola
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 10794
City Zephyr Cove State NV Zip Code 89448
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 ▼ 0.00

Date of Receipt 12 / 02 / 2011
Transaction ID : 3120269
Amount of Each Receipt this Period 20.00
Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 113.33
TOTAL This Period (last page this line 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 886 OF 2452 |
| | <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. Janet Beal
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 Thistle Way
 City Binghamton State NY Zip Code 13901
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2011
Transaction ID : 3120275
 Amount of Each Receipt this Period
 25.00
 Claire McCaskill Earmark Contributions

B. Ms. Anna Vanfrachen
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 68732
 City Seattle State WA Zip Code 98168
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2011
Transaction ID : 3120287
 Amount of Each Receipt this Period
 5.00
 Claire McCaskill Earmark Contributions

C. Ms. Harriette C. Buchanan
 Full Name (Last, First, Middle Initial)
 Mailing Address 194 Eastview Dr.
 City Boone State NC Zip Code 28607
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011
Transaction ID : 3122997
 Amount of Each Receipt this Period
 20.00
 Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
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 887 OF 2452 |
| | <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. Judith Wilcox
Full Name (Last, First, Middle Initial)

Mailing Address 26988 Heatherford Dr., Apt. 3

City Perrysburg State OH Zip Code 43551

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 ▼ 0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123003

Amount of Each Receipt this Period
6.70

Claire McCaskill Earmark Contributions

B. Ms. Patricia S. Byard
Full Name (Last, First, Middle Initial)

Mailing Address 3615 Maidu Pl.

City Davis State CA Zip Code 95618

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 ▼ 0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123009

Amount of Each Receipt this Period
100.00

Claire McCaskill Earmark Contributions

C. Ms. Muriel I. Patterson
Full Name (Last, First, Middle Initial)

Mailing Address 900 Hill Street

City Broomfield State CO Zip Code 80023

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 ▼ 0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123015

Amount of Each Receipt this Period
10.00

Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional).....▶ 116.70

TOTAL This Period (last page this line 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 888 OF 2452 |
| | <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. Michael Burt
Full Name (Last, First, Middle Initial)

Mailing Address 505 13th St. SE, Apt. 1

City Washington State DC Zip Code 20003

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : 3123021

Amount of Each Receipt this Period
 100.00

Claire McCaskill Earmark Contributions

B. M. J. McAdam
Full Name (Last, First, Middle Initial)

Mailing Address 710 Bird Bay Dr W

City Venice State FL Zip Code 34285

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : 3123027

Amount of Each Receipt this Period
 20.00

Claire McCaskill Earmark Contributions

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

Mailing Address 699 Lost River Road

City Mazama State WA Zip Code 98833

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : 3123039

Amount of Each Receipt this Period
 20.00

Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00

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 889 OF 2452 |
| | <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. Kim Sampson
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 604

City Collinsville State IL Zip Code 62234

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : 3123052

Amount of Each Receipt this Period
 20.00

Claire McCaskill Earmark Contributions

B. John W. Bakhuls
Full Name (Last, First, Middle Initial)

Mailing Address 6 Scottsdale Way # 1

City Novato State CA Zip Code 94947

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : 3123058

Amount of Each Receipt this Period
 15.00

Claire McCaskill Earmark Contributions

C. Ms. Eva Kelley
Full Name (Last, First, Middle Initial)

Mailing Address 760 N 2nd St., Apt. 18

City Paragould State AR Zip Code 72450

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : 3123064

Amount of Each Receipt this Period
 2.00

Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 37.00

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 890 OF 2452 |
| | <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. William Guthrie
Full Name (Last, First, Middle Initial)

Mailing Address 301 Aden Ct.

City State Zip Code
Upper Marlboro MD 20774

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 ▼
0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123070

Amount of Each Receipt this Period
4.16

Claire McCaskill Earmark Contributions

B. Ms. Paula Pippin
Full Name (Last, First, Middle Initial)

Mailing Address 23257 Willow Creek Ln

City State Zip Code
California MD 20619

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

Name of Employer Occupation
REQUESTED Retired teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123076

Amount of Each Receipt this Period
30.00

Claire McCaskill Earmark Contributions

C. Ms. Pat Sibley
Full Name (Last, First, Middle Initial)

Mailing Address 118 SW 116th Street
Apt. D24

City State Zip Code
Seattle WA 98146

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 ▼
0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123091

Amount of Each Receipt this Period
2.00

Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 36.16

TOTAL This Period (last page this line 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 891 OF 2452 |
| | <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. Dolores McCullough
 Full Name (Last, First, Middle Initial)
 Mailing Address 21415 33rd Ave.
 City Bayside State NY Zip Code 11361
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3123135
 Amount of Each Receipt this Period
 25.00
 Claire McCaskill Earmark Contributions

B. Carol Detweiler
 Full Name (Last, First, Middle Initial)
 Mailing Address 1704 Shadford Rd.
 City Ann Arbor State MI Zip Code 48104
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3123143
 Amount of Each Receipt this Period
 25.00
 Claire McCaskill Earmark Contributions

C. Mr. Curtis J. Eaton
 Full Name (Last, First, Middle Initial)
 Mailing Address 622 Hall Blvd
 City Mason State MI Zip Code 48854
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3123151
 Amount of Each Receipt this Period
 20.00
 Claire McCaskill Earmark Contributions

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 70.00 |
| 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 892 OF 2452 |
| | <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. Mr. Rowland Bell
 Full Name (Last, First, Middle Initial)
 Mailing Address 606 Fords Landing Way
 City Alexandria State VA Zip Code 22314
 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 ▼ 0.00

Date of Receipt
 12 / 07 / 2011
Transaction ID : 3123416
 Amount of Each Receipt this Period
 200.00
 Claire McCaskill Earmark Contributions

B. Mrs. Katherine Horowitz
 Full Name (Last, First, Middle Initial)
 Mailing Address 2173 Glenkirk Drive
 City San Jose State CA Zip Code 95124
 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 ▼ 0.00

Date of Receipt
 12 / 07 / 2011
Transaction ID : 3123428
 Amount of Each Receipt this Period
 20.00
 Claire McCaskill Earmark Contributions

C. Ms. Betty Armstrong
 Full Name (Last, First, Middle Initial)
 Mailing Address 16221 SE 29th St
 City Bellevue State WA Zip Code 98008
 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 ▼ 0.00

Date of Receipt
 12 / 07 / 2011
Transaction ID : 3123459
 Amount of Each Receipt this Period
 16.66
 Claire McCaskill Earmark Contributions

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 236.66 |
| 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: PAGE 893 OF 2452
(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. Laurie K. Mitchell

Mailing Address 1414 Magers Landing Road

City State Zip Code
Monkton MD 21111

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : 3123466

Amount of Each Receipt this Period
 25.00

Claire McCaskill Earmark Contributions

Full Name (Last, First, Middle Initial)
B. Robert E. Laveine

Mailing Address PO Box 412

City State Zip Code
West Burlington IA 52655

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : 3123469

Amount of Each Receipt this Period
 100.00

Claire McCaskill Earmark Contributions

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

Mailing Address 1140 5th Avenue

City State Zip Code
New York NY 10128

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : 3123475

Amount of Each Receipt this Period
 100.00

Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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 894 OF 2452 |
| | (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. Constance Counts
Full Name (Last, First, Middle Initial)
Mailing Address 8 Hancock Ave

| | | |
|-------------------|-------------|-------------------|
| City Lexington | State MA | Zip Code 02420 |
|-------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 07 | / | 2011 |

Transaction ID : 3123484

Amount of Each Receipt this Period

| |
|--------|
| 100.00 |
|--------|

Claire McCaskill Earmark Contributions

B. Ms. Maria Micola
Full Name (Last, First, Middle Initial)
Mailing Address 1215 Cedar Grove Rd

| | | |
|---------------|-------------|-------------------|
| City Media | State PA | Zip Code 19063 |
|---------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 07 | / | 2011 |

Transaction ID : 3123487

Amount of Each Receipt this Period

| |
|-------|
| 20.00 |
|-------|

Claire McCaskill Earmark Contributions

C. Ms. Betty L. Jucevic
Full Name (Last, First, Middle Initial)
Mailing Address 648 24th Place

| | | |
|-----------------------|-------------|-------------------|
| City Hermosa Beach | State CA | Zip Code 90254 |
|-----------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 08 | / | 2011 |

Transaction ID : 3125021

Amount of Each Receipt this Period

| |
|-------|
| 20.00 |
|-------|

Claire McCaskill Earmark Contributions

| | | |
|---|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | ▶ | 140.00 |
| 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 895 OF 2452 |
| | (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. Elsie Murray | | Date of Receipt 12 / 08 / 2011 |
| Mailing Address 1429 Beulah Rd | | Transaction ID : 3125031 |
| City Pittsburgh | State PA | Zip Code 15235 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| Name of Employer REQUESTED | Occupation REQUESTED | Claire McCaskill Earmark Contributions |
| 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. Ms. Eileen Coblens | | Date of Receipt 12 / 08 / 2011 |
| Mailing Address 91 Lancia Drive | | Transaction ID : 3125036 |
| City East Norwich | State NY | Zip Code 11732 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 15.00 |
| Name of Employer REQUESTED | Occupation REQUESTED | Claire McCaskill Earmark Contributions |
| 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. Ms. Nancy Wehrle | | Date of Receipt 12 / 08 / 2011 |
| Mailing Address 514 Chatham Rd | | Transaction ID : 3125037 |
| City Columbus | State OH | Zip Code 43214 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 15.00 |
| Name of Employer REQUESTED | Occupation REQUESTED | Claire McCaskill Earmark Contributions |
| 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).....▶ | 55.00 |
| 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 896 OF 2452 |
| | (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. Sandra Carr
Full Name (Last, First, Middle Initial)
Mailing Address 2742 Bennett Ridge Rd.
City Santa Rosa State CA Zip Code 95404
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 0.00

Date of Receipt 12 / 08 / 2011
Transaction ID : 3125041
Amount of Each Receipt this Period 25.00
Claire McCaskill Earmark Contributions

B. Catheine O'Connor
Full Name (Last, First, Middle Initial)
Mailing Address 429 Josiah Bartlett Rd.
City Concord State NH Zip Code 03301
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 0.00

Date of Receipt 12 / 08 / 2011
Transaction ID : 3125051
Amount of Each Receipt this Period 3.33
Claire McCaskill Earmark Contributions

C. Ms. Martha Pheneger
Full Name (Last, First, Middle Initial)
Mailing Address 2310 Sky View Ln.
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 0.00

Date of Receipt 12 / 08 / 2011
Transaction ID : 3125065
Amount of Each Receipt this Period 15.00
Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... **43.33**
TOTAL This Period (last page this line 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 897 OF 2452 |
| | (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

A. Mr. Carl Duzen
Full Name (Last, First, Middle Initial)

Mailing Address 520 Kathmere Road

City Havertown State PA Zip Code 19083

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 ▼ 0.00

Date of Receipt
 12 / 08 / 2011
Transaction ID : 3125069

Amount of Each Receipt this Period
 50.00

Claire McCaskill Earmark Contributions

B. Mr. John Quirk
Full Name (Last, First, Middle Initial)

Mailing Address 19103 Pala Mesa Place

City Porter Ranch State CA Zip Code 91326

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 ▼ 0.00

Date of Receipt
 12 / 09 / 2011
Transaction ID : 3126555

Amount of Each Receipt this Period
 50.00

Claire McCaskill Earmark Contributions

C. Ms. Joan Kowalski
Full Name (Last, First, Middle Initial)

Mailing Address 54275 Bradshaw DR

City New Baltimore State MI Zip Code 48047

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 ▼ 0.00

Date of Receipt
 12 / 09 / 2011
Transaction ID : 3126566

Amount of Each Receipt this Period
 8.33

Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 108.33

TOTAL This Period (last page this line 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 898 OF 2452 |
| | <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. Carole C. Allen
Full Name (Last, First, Middle Initial)
Mailing Address 180 Montana Drive
City Danville State CA Zip Code 94526
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 ▼ 0.00

Date of Receipt 12 / 09 / 2011
Transaction ID : 3126572
Amount of Each Receipt this Period 2.50
Claire McCaskill Earmark Contributions

B. Ms. Betty S. Tunstall
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1091
City Black Canyon City State AZ Zip Code 85324
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 ▼ 0.00

Date of Receipt 12 / 09 / 2011
Transaction ID : 3126591
Amount of Each Receipt this Period 10.00
Claire McCaskill Earmark Contributions

C. Ms. Nancy J. Doolittle
Full Name (Last, First, Middle Initial)
Mailing Address 572 Spencer Road
City Candor State NY Zip Code 13743
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 ▼ 0.00

Date of Receipt 12 / 09 / 2011
Transaction ID : 3126607
Amount of Each Receipt this Period 20.00
Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 32.50
TOTAL This Period (last page this line 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 899 OF 2452 |
| | <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. Laura Steele | | Date of Receipt 12 / 09 / 2011 Transaction ID : 3126610 |
| Mailing Address 10509 Hutting Pl. | | Amount of Each Receipt this Period 20.00 Claire McCaskill Earmark Contributions |
| City Silver Spring | State MD | Zip Code 20902 |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Dorothea R. Crisp | | Date of Receipt 12 / 09 / 2011 Transaction ID : 3126616 |
| Mailing Address 1245 SW Walking Wood | | Amount of Each Receipt this Period 20.00 Claire McCaskill Earmark Contributions |
| City Depoe Bay | State OR | Zip Code 97341 |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Bernardo Hollman | | Date of Receipt 12 / 12 / 2011 Transaction ID : 3127088 |
| Mailing Address 10237 Autumnview Ln | | Amount of Each Receipt this Period 2.00 Claire McCaskill Earmark Contributions |
| City San Diego | State CA | Zip Code 92126 |
| 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 ▼ 0.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 42.00 |
| 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 900 OF 2452 |
| | (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. Beatrice Weinstein
Full Name (Last, First, Middle Initial)
Mailing Address 35 Willow Gate
City Roslyn Heights State NY Zip Code 11577
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 ▼ 0.00

Date of Receipt 12 / 12 / 2011
Transaction ID : 3127093
Amount of Each Receipt this Period 50.00
Claire McCaskill Earmark Contributions

B. Ms. Susan Dennehy
Full Name (Last, First, Middle Initial)
Mailing Address 240 Central Park S.
City New York State NY Zip Code 10019
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 ▼ 0.00

Date of Receipt 12 / 12 / 2011
Transaction ID : 3127100
Amount of Each Receipt this Period 12.50
Claire McCaskill Earmark Contributions

C. Mr. Peter Henning
Full Name (Last, First, Middle Initial)
Mailing Address 8485 Hunts Point Ln
City Hunts Point State WA Zip Code 98004
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 ▼ 0.00

Date of Receipt 12 / 13 / 2011
Transaction ID : 3127135
Amount of Each Receipt this Period 10.00
Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 72.50
TOTAL This Period (last page this line 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 901 OF 2452 |
| | <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. Carolyn Thomas
Full Name (Last, First, Middle Initial)
Mailing Address 7409 Flower Ave.
City Takoma Park State MD Zip Code 20912
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 ▼ 0.00

Date of Receipt 12 / 14 / 2011
Transaction ID : 3127269
Amount of Each Receipt this Period 25.00
Claire McCaskill Earmark Contributions

B. Ms. Carol Cooper
Full Name (Last, First, Middle Initial)
Mailing Address 58 Grandview Ave.
City Kingston State NY Zip Code 12401
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 ▼ 0.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129893
Amount of Each Receipt this Period 10.00
Claire McCaskill Earmark Contributions

C. Ms. Nancy Richards
Full Name (Last, First, Middle Initial)
Mailing Address 5207 Church Drive
City Charleston State WV Zip Code 25306
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 ▼ 0.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129907
Amount of Each Receipt this Period 20.00
Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 902 OF 2452
(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 C. Bam
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 Greens Way
 City New Rochelle State NY Zip Code 10805
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129912
 Amount of Each Receipt this Period
 50.00
 Claire McCaskill Earmark Contributions

B. Mrs. Martha C. Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 6879 Highway 49 N.
 City Mariposa State CA Zip Code 95338
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129920
 Amount of Each Receipt this Period
 250.00
 Claire McCaskill Earmark Contributions

C. Mr. Ken Blanning
 Full Name (Last, First, Middle Initial)
 Mailing Address 4510 Katie Ln
 City Orlando State FL Zip Code 32806
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131717
 Amount of Each Receipt this Period
 10.00
 Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 310.00
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 903 OF 2452 |
| | <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 Carr
Full Name (Last, First, Middle Initial)

Mailing Address 3266 Chamberlain Cir.

City Ann Arbor State MI Zip Code 48103

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 ▼ 0.00

Date of Receipt
 12 / 16 / 2011
Transaction ID : 3131721

Amount of Each Receipt this Period
 100.00

Claire McCaskill Earmark Contributions

B. Ms. Charlotte Alexandre
Full Name (Last, First, Middle Initial)

Mailing Address 10345 Adams Pl

City Thornton State CO Zip Code 80229

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 ▼ 0.00

Date of Receipt
 12 / 19 / 2011
Transaction ID : 3131727

Amount of Each Receipt this Period
 10.00

Claire McCaskill Earmark Contributions

C. Mr. Frederick Phillips
Full Name (Last, First, Middle Initial)

Mailing Address 1939 Jefferson St., Apt. 101

City Hollywood State FL Zip Code 33020

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 ▼ 0.00

Date of Receipt
 12 / 19 / 2011
Transaction ID : 3131740

Amount of Each Receipt this Period
 2.50

Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 112.50

TOTAL This Period (last page this line 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 904 OF 2452 |
| <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. Mithlesh Prakash
Full Name (Last, First, Middle Initial)
Mailing Address 2665 Condor Cir
City Corona State CA Zip Code 92882
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 ▼ 0.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3131754
Amount of Each Receipt this Period 33.00
Claire McCaskill Earmark Contributions

B. Mr. Barry S. Weyburn
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 388
City Rock Hall State MD Zip Code 21661
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 ▼ 0.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3131763
Amount of Each Receipt this Period 50.00
Claire McCaskill Earmark Contributions

C. Ms. Louise Weschler
Full Name (Last, First, Middle Initial)
Mailing Address 161 Richdale Rd
City Colts Neck State NJ Zip Code 07722
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 ▼ 0.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3131780
Amount of Each Receipt this Period 25.00
Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional).....▶ 108.00
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 905 OF 2452 |
| | (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. Ellen M. Tirone
Full Name (Last, First, Middle Initial)
Mailing Address 12 Edendale Ln
City Durham State NH Zip Code 03824
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 ▼ 0.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3131786
Amount of Each Receipt this Period 10.00
Claire McCaskill Earmark Contributions

B. Ms. Chrystyne Braaten
Full Name (Last, First, Middle Initial)
Mailing Address 1222 SW Leschi DR
City Oak Harbor State WA Zip Code 98277
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 ▼ 0.00

Date of Receipt 12 / 20 / 2011
Transaction ID : 3132535
Amount of Each Receipt this Period 1.00
Claire McCaskill Earmark Contributions

C. Ms. Bernice R. Horn
Full Name (Last, First, Middle Initial)
Mailing Address 929 Stratford Avenue
City Melrose Park State PA Zip Code 19027
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 ▼ 0.00

Date of Receipt 12 / 20 / 2011
Transaction ID : 3132539
Amount of Each Receipt this Period 25.00
Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional).....▶ 36.00
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 906 OF 2452
(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. Carl Weinberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 42 Green Oaks Ct.
 City Walnut Creek State CA Zip Code 94596
 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 ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3132548
 Amount of Each Receipt this Period
 20.00
 Claire McCaskill Earmark Contributions

B. Ms. Judy Hunter
 Full Name (Last, First, Middle Initial)
 Mailing Address 3586 Indigo Pond Dr
 City Palm Harbor State FL Zip Code 34685
 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 ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3132555
 Amount of Each Receipt this Period
 1.67
 Claire McCaskill Earmark Contributions

C. Ms. Clair A. Sharpless
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Drumlin Rd.
 City West Simsbury State CT Zip Code 6092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3132577
 Amount of Each Receipt this Period
 100.00
 Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 121.67
TOTAL This Period (last page this line 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 907 OF 2452 |
| | <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. Nancy Anderson
Full Name (Last, First, Middle Initial)

Mailing Address 245 N Vine St Apt 903

City Salt Lake City State UT Zip Code 84103

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011

Transaction ID : 3133752

Amount of Each Receipt this Period
 10.00

Claire McCaskill Earmark Contributions

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

Mailing Address 10 Allen Road

City Bridgewater State NJ Zip Code 08807

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011

Transaction ID : 3133756

Amount of Each Receipt this Period
 12.50

Claire McCaskill Earmark Contributions

C. Ms. Eleanor T. Weiss
Full Name (Last, First, Middle Initial)

Mailing Address 360 Osgood Road

City Milford State NH Zip Code 03055

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011

Transaction ID : 3133764

Amount of Each Receipt this Period
 30.00

Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 52.50

TOTAL This Period (last page this line 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 908 OF 2452 |
| | (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. Mrs. Marian Ryan
Full Name (Last, First, Middle Initial)
Mailing Address 2460 Linette Ct
City Yorktown Heights State NY Zip Code 10598
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 0.00

Date of Receipt
12 / 22 / 2011
Transaction ID : 3133769
Amount of Each Receipt this Period
20.00
Claire McCaskill Earmark Contributions

B. Ms. Natalie Grigg
Full Name (Last, First, Middle Initial)
Mailing Address 92 Lakeshore Road
City Boxford State MA Zip Code 01921
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation Housewife/farmer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 0.00

Date of Receipt
12 / 27 / 2011
Transaction ID : 3139499
Amount of Each Receipt this Period
100.00
Claire McCaskill Earmark Contributions

C. Ms. Patricia Froman
Full Name (Last, First, Middle Initial)
Mailing Address 214 Parliament Dr.
City Coraopolis State PA Zip Code 15108
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 0.00

Date of Receipt
12 / 27 / 2011
Transaction ID : 3139523
Amount of Each Receipt this Period
20.00
Claire McCaskill Earmark Contributions

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 140.00 |
| 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 909 OF 2452 |
| | <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 Niccolls
Full Name (Last, First, Middle Initial)
Mailing Address 1830 Garden Dr.
City Medford State OR Zip Code 97504
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 0.00

Date of Receipt 12 / 27 / 2011
Transaction ID : 3139541
Amount of Each Receipt this Period 40.00
Claire McCaskill Earmark Contributions

B. Ms. Ellen Herman
Full Name (Last, First, Middle Initial)
Mailing Address 103 Springridge Drive
City Berkeley Heights State NJ Zip Code 07922
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 0.00

Date of Receipt 12 / 27 / 2011
Transaction ID : 3139551
Amount of Each Receipt this Period 25.00
Claire McCaskill Earmark Contributions

C. Rebecca M. Hecking
Full Name (Last, First, Middle Initial)
Mailing Address 106 Plum St.
City Greenville State PA Zip Code 16125
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 0.00

Date of Receipt 12 / 28 / 2011
Transaction ID : 3139552
Amount of Each Receipt this Period 25.00
Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... **90.00**
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 910 OF 2452 |
| | <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. Katha D. Massey
 Full Name (Last, First, Middle Initial)
 Mailing Address 270 Victoria Street
 City Commerce State GA Zip Code 30529
 Name of Employer REQUESTED Occupation Librarian
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 29 / 2011
Transaction ID : 3139557
 Amount of Each Receipt this Period 50.00
 Claire McCaskill Earmark Contributions

B. Ms. Colleen B. Dipaul
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 95
 City Rector State PA Zip Code 15677
 Name of Employer REQUESTED Occupation REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 29 / 2011
Transaction ID : 3139565
 Amount of Each Receipt this Period 15.00
 Claire McCaskill Earmark Contributions

C. Nessa Peters
 Full Name (Last, First, Middle Initial)
 Mailing Address 1010 cann road
 City silver spring State MD Zip Code 20904
 Name of Employer retired Occupation teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 14 / 2011
Transaction ID : 3127263
 Amount of Each Receipt this Period 20.00
 Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 911 OF 2452 |
| | <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. Marciarose Shestack | | Date of Receipt MM / DD / YYYY 12 / 19 / 2011 Transaction ID : 3131774 |
| Mailing Address 2201 Pennsylvania Avenue | | Amount of Each Receipt this Period 16.67 |
| City Philadelphia | State PA | Zip Code 19130 |
| FEC ID number of contributing federal political committee. C | | Claire McCaskill Earmark Contributions |
| Name of Employer retired | Occupation TV anchor journalist | |
| 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. Ms. Judith Rogovin | | Date of Receipt MM / DD / YYYY 12 / 20 / 2011 Transaction ID : 3132560 |
| Mailing Address 4556 Forest Wood Trl | | Amount of Each Receipt this Period 0.83 |
| City Sarasota | State FL | Zip Code 34241 |
| FEC ID number of contributing federal political committee. C | | Claire McCaskill Earmark Contributions |
| Name of Employer Saint Paul Public Schls | Occupation Teacher | |
| 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. Mr. Andrew Carson | | Date of Receipt MM / DD / YYYY 12 / 01 / 2011 Transaction ID : 3120161 |
| Mailing Address PO Box 709 | | Amount of Each Receipt this Period 10.00 |
| City Wilson | State WY | Zip Code 83014 |
| FEC ID number of contributing federal political committee. C | | Claire McCaskill Earmark Contributions |
| Name of Employer self | Occupation mtn guide | |
| 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).....▶ | 27.50 |
| TOTAL This Period (last page this line 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 912 OF 2452 |
| | <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. Harry Schwartz
Full Name (Last, First, Middle Initial)

Mailing Address 50 Morningside DR

City New York State NY Zip Code 10025

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

Name of Employer self Occupation Consultant

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
 12 / 01 / 2011

Transaction ID : 3120191

Amount of Each Receipt this Period
 30.00

Claire McCaskill Earmark Contributions

B. Mr. Phillip S. Berry
Full Name (Last, First, Middle Initial)

Mailing Address 4510 Canyon Road

City Lafayette State CA Zip Code 94549

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

Name of Employer Self Occupation Lawyer

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
 12 / 05 / 2011

Transaction ID : 3123034

Amount of Each Receipt this Period
 250.00

Claire McCaskill Earmark Contributions

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

Mailing Address 229 Fayette New Wilmington

City New Wilmington State PA Zip Code 16142

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

Name of Employer Self Occupation Artist

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
 12 / 09 / 2011

Transaction ID : 3126601

Amount of Each Receipt this Period
 100.00

Claire McCaskill Earmark Contributions

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 380.00 |
| 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 913 OF 2452 |
| | <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. Clairan Ferrono
Full Name (Last, First, Middle Initial)
Mailing Address 5432 S Dorchester Ave.
City Chicago State IL Zip Code 60615
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Artist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 27 / 2011**
Transaction ID : 3139546
Amount of Each Receipt this Period **50.00**
Claire McCaskill Earmark Contributions

B. Mr. Richard R. Gray
Full Name (Last, First, Middle Initial)
Mailing Address 131 Riverside Dr., 1-A
City New York State NY Zip Code 10024
FEC ID number of contributing federal political committee. **C**
Name of Employer self-employed Occupation consultant
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 01 / 2011**
Transaction ID : 3120155
Amount of Each Receipt this Period **100.00**
Claire McCaskill Earmark Contributions

C. James Gartner
Full Name (Last, First, Middle Initial)
Mailing Address 78 Knapp ave apt b
City Clifton State NJ Zip Code 07011
FEC ID number of contributing federal political committee. **C**
Name of Employer Sika Corporation Occupation mail clerk
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 06 / 2011**
Transaction ID : 3123166
Amount of Each Receipt this Period **10.00**
Claire McCaskill Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... **160.00**
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 914 OF 2452 |
| | <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. Viviana Sanchez | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2011 |
| Mailing Address 1119 19 th street | | Transaction ID : 3127129 |
| City Bellingham | State WA | Zip Code 98225 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 5.00 |
| Name of Employer St. Joseph Hospital | Occupation Social Worker | Claire McCaskill Earmark Contributions |
| 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. Ms. Cynthia Brantley | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2011 |
| Mailing Address 3100 Shelter Cove Pl | | Transaction ID : 3123051 |
| City Davis | State CA | Zip Code 95616 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 25.00 |
| Name of Employer U of CA | Occupation Professor | Claire McCaskill Earmark Contributions |
| 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. Ms. Anne Campbell | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2011 |
| Mailing Address 1210 Spruce Street | | Transaction ID : 3127106 |
| City Philadelphia | State PA | Zip Code 19107 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 150.00 |
| Name of Employer U of PA | Occupation analyst | Claire McCaskill Earmark Contributions |
| 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).....▶ | 180.00 |
| 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 915 OF 2452 |
| | <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. Martha Stampfer
Full Name (Last, First, Middle Initial)
Mailing Address 7290 Sayre Drive

| | | |
|-----------------|-------------|-------------------|
| City Oakland | State CA | Zip Code 94611 |
|-----------------|-------------|-------------------|

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

| | |
|-----------------------------------|-------------------------|
| Name of Employer U. California | Occupation biologist |
|-----------------------------------|-------------------------|

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 |
| 12 | / | 09 | / | 2011 |

Transaction ID : 3126578

Amount of Each Receipt this Period

| |
|-------|
| 20.00 |
|-------|

 Claire McCaskill Earmark Contributions

B. Mary Louise Sejda
Full Name (Last, First, Middle Initial)
Mailing Address 6228 Forest Ave.

| | | |
|-----------------|-------------|-------------------|
| City Hammond | State IN | Zip Code 46324 |
|-----------------|-------------|-------------------|

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

| | |
|---|-----------------------------|
| Name of Employer UNIV OF CHICAGO HOSPITALS | Occupation ASST DIRECTOR |
|---|-----------------------------|

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 |
| 12 | / | 09 | / | 2011 |

Transaction ID : 3126597

Amount of Each Receipt this Period

| |
|-------|
| 20.00 |
|-------|

 Claire McCaskill Earmark Contributions

C. Mr. Robert H. Schor
Full Name (Last, First, Middle Initial)
Mailing Address 10 Ambassador Drive

| | | |
|-------------------|-------------|-------------------|
| City Rochester | State NY | Zip Code 14610 |
|-------------------|-------------|-------------------|

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

| | |
|--|-----------------------|
| Name of Employer University of Pittsburgh | Occupation Faculty |
|--|-----------------------|

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 |
| 12 | / | 20 | / | 2011 |

Transaction ID : 3132569

Amount of Each Receipt this Period

| |
|--------|
| 166.67 |
|--------|

 Claire McCaskill Earmark Contributions

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 206.67 |
| TOTAL This Period (last page this line 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 916 OF 2452 |
| | <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. Paula Pippin | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123074 |
| Mailing Address 23257 Willow Creek Ln | | Amount of Each Receipt this Period 30.00 Debbie Stabenow Earmarked Contributions |
| City California | State MD | Zip Code 20619 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer REQUESTED | Occupation Retired teacher | |
| 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. Ms. Ellen Herman | | Date of Receipt 12 / 27 / 2011 Transaction ID : 3139550 |
| Mailing Address 103 Springridge Drive | | Amount of Each Receipt this Period 25.00 Debbie Stabenow Earmarked Contributions |
| City Berkeley Heights | State NJ | Zip Code 07922 |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Jo Budman | | Date of Receipt 12 / 02 / 2011 Transaction ID : 3119718 |
| Mailing Address 31 Wilding Lane | | Amount of Each Receipt this Period 18.00 Dianne Feinstein Earmarked Contributions |
| City Oakland | State CA | Zip Code 94618 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer n/a | Occupation Retired | |
| 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).....▶ | 73.00 |
| 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 917 OF 2452 |
| | (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. Samantha Sandler
Full Name (Last, First, Middle Initial)

Mailing Address 31 East 79th St

City New York State NY Zip Code 10075

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 ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2011

Transaction ID : 3125777

Amount of Each Receipt this Period
 100.00

Dianne Feinstein Earmarked Contributions

B. Ms. Bonnie L Kolker
Full Name (Last, First, Middle Initial)

Mailing Address 4 Sycamore Way

City Mt. Arlington State NJ Zip Code 07856

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 ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3132843

Amount of Each Receipt this Period
 25.00

Dianne Feinstein Earmarked Contributions

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

Mailing Address 7913 Vantage Ave

City North Hollywood State CA Zip Code 91605

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 ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011

Transaction ID : 3133955

Amount of Each Receipt this Period
 54.00

Dianne Feinstein Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ **179.00**

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 918 OF 2452 |
| | <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. Dr. Gino Crocetti
Full Name (Last, First, Middle Initial)
Mailing Address 652 w 163 st
City new york State NY Zip Code 10032
FEC ID number of contributing federal political committee. **C**
Name of Employer city & country school Occupation Teacher
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0.00**

Date of Receipt
12 / 21 / 2011
Transaction ID : 3133979
Amount of Each Receipt this Period
15.00
Dianne Feinstein Earmarked Contributions

B. Pearl Spiro
Full Name (Last, First, Middle Initial)
Mailing Address 62 New York Avenue
City Congers State NY Zip Code 10920
FEC ID number of contributing federal political committee. **C**
Name of Employer Columbia University Occupation Associate Provost
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0.00**

Date of Receipt
12 / 03 / 2011
Transaction ID : 3119967
Amount of Each Receipt this Period
50.00
Dianne Feinstein Earmarked Contributions

c. Ms. Serena S. Connelly
Full Name (Last, First, Middle Initial)
Mailing Address 3156 Brookhollow Drive
City Dallas State TX Zip Code 75234
FEC ID number of contributing federal political committee. **C**
Name of Employer Contran Corp. Occupation foundation executive
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0.00**

Date of Receipt
12 / 11 / 2011
Transaction ID : 3125540
Amount of Each Receipt this Period
500.00
Dianne Feinstein Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... **565.00**
TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 919 OF 2452
(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. Marcia L Hoffer

Mailing Address 169 Mathewson Rd

City State Zip Code
Barrington RI 02806

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

Name of Employer Occupation
E H Ashley & Co Inc Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 29 / 2011
Transaction ID : 3137918

Amount of Each Receipt this Period
50.00

Dianne Feinstein Earmarked Contributions

Full Name (Last, First, Middle Initial)
B. Ms. Judith Herman

Mailing Address 15 Harrington Avenue

City State Zip Code
Concord MA 01742

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

Name of Employer Occupation
JKSH Consultant / Project

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 31 / 2011
Transaction ID : 3139123

Amount of Each Receipt this Period
50.00

Dianne Feinstein Earmarked Contributions

Full Name (Last, First, Middle Initial)
C. Ms. Jane C Gilman

Mailing Address 140 Sewall Ave

City State Zip Code
brookline MA 02446

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

Name of Employer Occupation
N/A Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 09 / 2011
Transaction ID : 3125822

Amount of Each Receipt this Period
10.00

Dianne Feinstein Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00

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 920 OF 2452 |
| | <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. Eva K. Grove
 Full Name (Last, First, Middle Initial)
 Mailing Address 171 Main St #278
 City Los Altos State CA Zip Code 94022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer na Occupation homemaker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt
 12 / 23 / 2011
Transaction ID : 3134290
 Amount of Each Receipt this Period
 1000.00
 Dianne Feinstein Earmarked Contributions

B. Ms. Jois C Hofmann
 Full Name (Last, First, Middle Initial)
 Mailing Address 1914 Subtropic Dr.
 City La Habra Heights, State CA Zip Code 90631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none-retired Occupation retired educator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt
 12 / 04 / 2011
Transaction ID : 3119850
 Amount of Each Receipt this Period
 25.00
 Dianne Feinstein Earmarked Contributions

C. Mr. Charles C. Walbridge II
 Full Name (Last, First, Middle Initial)
 Mailing Address 1886 Little Sandy Road
 City Bruceton Mills State WV Zip Code 26525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Northwest River Supplies Occupation sales rep
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt
 12 / 03 / 2011
Transaction ID : 3119868
 Amount of Each Receipt this Period
 100.00
 Dianne Feinstein Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... **1125.00**
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 921 OF 2452 |
| | <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. Bea Gold
 Full Name (Last, First, Middle Initial)
 Mailing Address 2206 Micheltorena
 City Los Angeles State CA Zip Code 90039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer not employed Occupation not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 01 / 2011
Transaction ID : 3119220
 Amount of Each Receipt this Period 30.00
 Dianne Feinstein Earmarked Contributions

B. Ms. Marian Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 67-87 Booth St.
 City Forest Hills State NY Zip Code 11375
 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 ▼ 0.00

Date of Receipt
 12 / 23 / 2011
Transaction ID : 3135450
 Amount of Each Receipt this Period 50.00
 Dianne Feinstein Earmarked Contributions

C. Ms. Joanne Lyman
 Full Name (Last, First, Middle Initial)
 Mailing Address 163 East 81 St Street
 City NYC State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation designer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 01 / 2011
Transaction ID : 3119267
 Amount of Each Receipt this Period 50.00
 Dianne Feinstein Earmarked Contributions

SUBTOTAL of Receipts This Page (optional).....▶ 130.00
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 922 OF 2452 |
| | <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. Christina Irwin
Full Name (Last, First, Middle Initial)

Mailing Address 1309 Glenmorrie Drive

City Lake Oswego State OR Zip Code 97034

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011

Transaction ID : 3130313

Amount of Each Receipt this Period
 5.00

Dina Titus Earmark Contributions

B. Ms. Lois Chaffee
Full Name (Last, First, Middle Initial)

Mailing Address 248 East 7th Street

City New York State NY Zip Code 10009

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011

Transaction ID : 3130861

Amount of Each Receipt this Period
 25.00

Dina Titus Earmark Contributions

C. Ms. Lynne N. Roberts
Full Name (Last, First, Middle Initial)

Mailing Address 1212 McKinley Dr

City Roseville State CA Zip Code 95661

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2011

Transaction ID : 3134221

Amount of Each Receipt this Period
 100.00

Dina Titus Earmark Contributions

SUBTOTAL of Receipts This Page (optional).....▶ 130.00

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 923 OF 2452
(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 Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 2012 Blue Mount Road
 City Monkton State MD Zip Code 21111
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : 3138718
 Amount of Each Receipt this Period
 25.00
 Dina Titus Earmark Contributions

B. Dr. Gustav F Papanek
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Mason St
 City Lexington State MA Zip Code 02421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BIDE Occupation Economist
 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
 12 / 31 / 2011
Transaction ID : 3139070
 Amount of Each Receipt this Period
 150.00
 Dina Titus Earmark Contributions

C. Dr. Gino Crocetti
 Full Name (Last, First, Middle Initial)
 Mailing Address 652 w 163 st
 City new york State NY Zip Code 10032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer city & country school Occupation Teacher
 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
 12 / 21 / 2011
Transaction ID : 3133972
 Amount of Each Receipt this Period
 20.00
 Dina Titus Earmark Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 195.00
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 924 OF 2452 |
| | <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. Gino Crocetti | | Date of Receipt 12 / 21 / 2011 Transaction ID : 3134170 |
| Mailing Address 652 w 163 st | | Amount of Each Receipt this Period 20.00 Dina Titus Earmark Contributions |
| City new york | State NY | Zip Code 10032 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer city & country school | Occupation Teacher | |
| 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. Graeme Williams | | Date of Receipt 12 / 29 / 2011 Transaction ID : 3138273 |
| Mailing Address 22 Hall St Unit 2 | | Amount of Each Receipt this Period 50.00 Dina Titus Earmark Contributions |
| City Waltham | State MA | Zip Code 02453 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Compuware | Occupation Sales Engineer | |
| 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. Ms. Marcia L Hoffer | | Date of Receipt 12 / 29 / 2011 Transaction ID : 3137916 |
| Mailing Address 169 Mathewson Rd | | Amount of Each Receipt this Period 25.00 Dina Titus Earmark Contributions |
| City Barrington | State RI | Zip Code 02806 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer E H Ashley & Co Inc | Occupation Executive | |
| 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).....▶ | 95.00 |
| 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 925 OF 2452 |
| | (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. Eva K. Grove
Full Name (Last, First, Middle Initial)
Mailing Address 171 Main St #278

| | | |
|-------------------|-------------|-------------------|
| City Los Altos | State CA | Zip Code 94022 |
|-------------------|-------------|-------------------|

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

| | |
|------------------------|-------------------------|
| Name of Employer na | Occupation homemaker |
|------------------------|-------------------------|

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 |
| 12 | / | 23 | / | 2011 |

Transaction ID : 3134288

Amount of Each Receipt this Period

| |
|---------|
| 1000.00 |
|---------|

Dina Titus Earmark Contributions

B. Ms. Marian Harris
Full Name (Last, First, Middle Initial)
Mailing Address 67-87 Booth St.

| | | |
|----------------------|-------------|-------------------|
| City Forest Hills | State NY | Zip Code 11375 |
|----------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 23 | / | 2011 |

Transaction ID : 3135448

Amount of Each Receipt this Period

| |
|-------|
| 50.00 |
|-------|

Dina Titus Earmark Contributions

C. Ms. Alison G. Schiff
Full Name (Last, First, Middle Initial)
Mailing Address 41 West 96

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10025 |
|------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 19 | / | 2011 |

Transaction ID : 3132391

Amount of Each Receipt this Period

| |
|-------|
| 25.00 |
|-------|

Dina Titus Earmark Contributions

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1075.00 |
| 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 926 OF 2452 |
| | <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. Janet Svirsky | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 28 / 2011 |
| Mailing Address 8908 Liberty Lane | | Transaction ID : 3137136 |
| City Potomac | State MD | Zip Code 20854 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50.00 | |
| Name of Employer Self | Occupation teacher/artist/mom | Dina Titus Earmark Contributions |
| 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. Mr. Nichols M. Cutting | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2011 |
| Mailing Address 1035 NE Diane Place | | Transaction ID : 3138742 |
| City Corvallis | State OR | Zip Code 97330 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 125.00 | |
| Name of Employer Spectrum Strategic Capital Management | Occupation Investment Advisor | Dina Titus Earmark Contributions |
| 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. Ms. Cynthia Carr | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2011 |
| Mailing Address 44 Brookwood Drive | | Transaction ID : 3122209 |
| City Woodbridge | State CT | Zip Code 06525 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500.00 | |
| Name of Employer Yale University | Occupation Attorney | Elizabeth Esty Earmarks |
| 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).....▶ | 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 927 OF 2452 |
| | <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. James Crawford
Full Name (Last, First, Middle Initial)
Mailing Address 5760 Citrus Ave
City Whittier State CA Zip Code 90601
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 **0.00**

Date of Receipt **12 / 01 / 2011**
Transaction ID : 3120178
Amount of Each Receipt this Period **20.00**
Elizabeth Warren Earmarks

B. Ms. Phyllis Gardner
Full Name (Last, First, Middle Initial)
Mailing Address 406 Tennessee Glen Way
City Mill Valley State CA Zip Code 94941
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 **0.00**

Date of Receipt **12 / 02 / 2011**
Transaction ID : 3120253
Amount of Each Receipt this Period **10.00**
Elizabeth Warren Earmarks

C. Ms. Vivian Hoffman
Full Name (Last, First, Middle Initial)
Mailing Address 1600 Augusta Dr. Apt. 513
City Houston State TX Zip Code 77024
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 **0.00**

Date of Receipt **12 / 02 / 2011**
Transaction ID : 3120273
Amount of Each Receipt this Period **12.00**
Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... **42.00**
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 928 OF 2452 |
| | <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. Joan Hubbell
Full Name (Last, First, Middle Initial)

Mailing Address 509 Aurora Ave Unit 420

City Naperville State IL Zip Code 60540

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : 3123079

Amount of Each Receipt this Period
 20.00

Elizabeth Warren Earmarks

B. Ms. Mary Lyons
Full Name (Last, First, Middle Initial)

Mailing Address 36 Barkley Cir.

City Fort Myers State FL Zip Code 33907

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : 3123096

Amount of Each Receipt this Period
 20.00

Elizabeth Warren Earmarks

C. Ms. Joyce O. Newcomb
Full Name (Last, First, Middle Initial)

Mailing Address 5355 Pooks Hill Rd.

City Bethesda State MD Zip Code 20814

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123421

Amount of Each Receipt this Period
 20.00

Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

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 929 OF 2452 |
| | <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. Gylan Dickey
Full Name (Last, First, Middle Initial)

Mailing Address 805 Glen Oak Dr

City Lebanon State OR Zip Code 97355

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123452

Amount of Each Receipt this Period
 10.00

Elizabeth Warren Earmarks

B. Ms. Cynthia Pedikin
Full Name (Last, First, Middle Initial)

Mailing Address 118 Hussey RD

City Peaks Island State ME Zip Code 04108

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123482

Amount of Each Receipt this Period
 12.50

Elizabeth Warren Earmarks

C. Ms. Susan P. Nye
Full Name (Last, First, Middle Initial)

Mailing Address 671 Roxborough Avenue

City Philadelphia State PA Zip Code 19128

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123490

Amount of Each Receipt this Period
 8.33

Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.83

TOTAL This Period (last page this line 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 930 OF 2452 |
| | <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. Mrs. Ruth Giese
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 Asbury Avenue
 City Binghamton State NY Zip Code 13901
 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 ▼ 0.00

Date of Receipt
 12 / 08 / 2011
Transaction ID : 3125001
 Amount of Each Receipt this Period 25.00
 Elizabeth Warren Earmarks

B. Ms. Mary Jefferson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5235 E Fern Haven Ln.
 City Anaheim State CA Zip Code 92807
 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 ▼ 0.00

Date of Receipt
 12 / 08 / 2011
Transaction ID : 3125013
 Amount of Each Receipt this Period 20.00
 Elizabeth Warren Earmarks

C. Ms. Donna E. Willoughby
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 Lake Creek Rd.
 City Salmon State ID Zip Code 83467
 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 ▼ 0.00

Date of Receipt
 12 / 08 / 2011
Transaction ID : 3125044
 Amount of Each Receipt this Period 50.00
 Elizabeth Warren Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 95.00 |
| 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 931 OF 2452 |
| | (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. Christina D. Baker
Full Name (Last, First, Middle Initial)

Mailing Address 1150 Willow Glen Way

City San Jose State CA Zip Code 95125

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 ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011

Transaction ID : 3125056

Amount of Each Receipt this Period
50.00

Elizabeth Warren Earmarks

B. Ms. Elizabeth Hale
Full Name (Last, First, Middle Initial)

Mailing Address 9529 SW 196th Avenue Rd

City Dunnellon State FL Zip Code 34432

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 ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011

Transaction ID : 3126561

Amount of Each Receipt this Period
50.00

Elizabeth Warren Earmarks

C. Ms. Gail Silverstone
Full Name (Last, First, Middle Initial)

Mailing Address 6633 32 Place, NW
32nd Place, NW

City Washington, State DC Zip Code 20015

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 ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011

Transaction ID : 3126621

Amount of Each Receipt this Period
33.35

Elizabeth Warren Earmarks

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 133.35 |
| TOTAL This Period (last page this line 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 932 OF 2452
(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. B. Kay Kinnear

Mailing Address 621B Idlewild Circle

City State Zip Code
Birmingham AL 35205

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 3126827

Amount of Each Receipt this Period
 100.00

Elizabeth Warren Earmarks

Full Name (Last, First, Middle Initial)
B. Ms. Grace Winchell

Mailing Address 6411 Weber Circle

City State Zip Code
Huntington Beach CA 92647

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 3127080

Amount of Each Receipt this Period
 50.00

Elizabeth Warren Earmarks

Full Name (Last, First, Middle Initial)
C. Mrs. Emily Rauh Pulitzer

Mailing Address 4903 Pershing Pl.

City State Zip Code
Saint Louis MO 63108

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 3127085

Amount of Each Receipt this Period
 250.00

Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

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 933 OF 2452
(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. David P. Brickley
 Mailing Address 71 Throckmorton Ave
 City State Zip Code
 West Long Branch NJ 07764
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 3127095
 Amount of Each Receipt this Period
 25.00
 Elizabeth Warren Earmarks

Full Name (Last, First, Middle Initial)
B. Ms. Joyanne B. Mills
 Mailing Address 40W665 Grand Monde Drive
 City State Zip Code
 Elburn IL 60119
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3127121
 Amount of Each Receipt this Period
 125.00
 Elizabeth Warren Earmarks

Full Name (Last, First, Middle Initial)
C. Mrs. Jane D. Ortel
 Mailing Address 66 Silver Lake Ave.
 City State Zip Code
 Wakefield RI 02879
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3127123
 Amount of Each Receipt this Period
 100.00
 Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 934 OF 2452 |
| | <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

A. Ms. Marianne Bayley
 Full Name (Last, First, Middle Initial)
 Mailing Address 7501 Cumberland Rd., # 26
 City Seminole State FL Zip Code 33777
 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 ▼ 0.00

Date of Receipt
 12 / 13 / 2011
Transaction ID : 3127139
 Amount of Each Receipt this Period 20.00
 Elizabeth Warren Earmarks

B. Rosemarie Sheperd
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 West 3rd Ave.
 City Johnstown State NY Zip Code 12095
 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 ▼ 0.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3129886
 Amount of Each Receipt this Period 50.00
 Elizabeth Warren Earmarks

C. Mrs. Peg French
 Full Name (Last, First, Middle Initial)
 Mailing Address 544 Kemmerer Road
 City State College State PA Zip Code 16801
 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 ▼ 0.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3129902
 Amount of Each Receipt this Period 50.00
 Elizabeth Warren Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 120.00 |
| 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 935 OF 2452 |
| | <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. Gloria M. Gray
Full Name (Last, First, Middle Initial)

Mailing Address 436 Crestover Circle

City Richardson State TX Zip Code 75080

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 ▼ 0.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3129914

Amount of Each Receipt this Period
 20.00

Elizabeth Warren Earmarks

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

Mailing Address 150 McKnight Drive

City Laguna Beach State CA Zip Code 92651

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 ▼ 0.00

Date of Receipt
 12 / 16 / 2011
Transaction ID : 3131723

Amount of Each Receipt this Period
 100.00

Elizabeth Warren Earmarks

c. Ms. Sydney Story
Full Name (Last, First, Middle Initial)

Mailing Address 205 E Terrace Ave

City Fresno State CA Zip Code 93704

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 ▼ 0.00

Date of Receipt
 12 / 19 / 2011
Transaction ID : 3131744

Amount of Each Receipt this Period
 10.00

Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00

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 936 OF 2452 |
| | <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. Mr. Fred Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 Holmes Ranch Rd
 PO Box 328
 City Philo State CA Zip Code 95466
 Name of Employer n/a Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 19 / 2011
Transaction ID : 3131791
 Amount of Each Receipt this Period
 20.00
 Elizabeth Warren Earmarks

B. Ms. Sally S. Levinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2985 Pacific Avenue
 Apt. 8
 City San Francisco State CA Zip Code 94115
 Name of Employer n/a Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 20 / 2011
Transaction ID : 3132536
 Amount of Each Receipt this Period
 25.00
 Elizabeth Warren Earmarks

C. Mr. Bernard Shyffer
 Full Name (Last, First, Middle Initial)
 Mailing Address 4212 Palos Verdes Drive E
 City Rancho Pls. Vrd. State CA Zip Code 90275
 Name of Employer n/a Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 20 / 2011
Transaction ID : 3132541
 Amount of Each Receipt this Period
 100.00
 Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00
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 937 OF 2452 |
| | <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. Elizabeth Lee Williams
Full Name (Last, First, Middle Initial)

Mailing Address 28 Olmstead Green Court

| | | |
|-------------------|-------------|-------------------|
| City Baltimore | State MD | Zip Code 21210 |
|-------------------|-------------|-------------------|

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 ▼ **0.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 21 | / | 2011 |

Transaction ID : 3133747

Amount of Each Receipt this Period

| |
|-------|
| 30.00 |
|-------|

Elizabeth Warren Earmarks

B. Mr. Merle D. Borchers
Full Name (Last, First, Middle Initial)

Mailing Address 2346 78th Street E

| | | |
|---------------------|-------------|-------------------|
| City Inver Grove | State MN | Zip Code 55076 |
|---------------------|-------------|-------------------|

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 ▼ **0.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3139532

Amount of Each Receipt this Period

| |
|------|
| 6.67 |
|------|

Elizabeth Warren Earmarks

C. Ms. Kathryn M. Macchi
Full Name (Last, First, Middle Initial)

Mailing Address 1003 E 44th Street

| | | |
|----------------|-------------|-------------------|
| City Austin | State TX | Zip Code 78751 |
|----------------|-------------|-------------------|

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

| | |
|------------------------|--------------------------------|
| Name of Employer 3M | Occupation Computer Support |
|------------------------|--------------------------------|

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 |
| 12 | / | 05 | / | 2011 |

Transaction ID : 3123086

Amount of Each Receipt this Period

| |
|-------|
| 10.00 |
|-------|

Elizabeth Warren Earmarks

| | |
|--|--------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 46.67 |
| TOTAL This Period (last page this line 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 938 OF 2452 |
| | <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. Karen Rothblatt
Full Name (Last, First, Middle Initial)

Mailing Address 1337 Derby St

City Berkeley State CA Zip Code 94702

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

Name of Employer Alameda Hospital Occupation RN

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
 12 / 27 / 2011

Transaction ID : 3139511

Amount of Each Receipt this Period
 8.34

Elizabeth Warren Earmarks

B. Ms. Marybeth Webster
Full Name (Last, First, Middle Initial)

Mailing Address 2916 E Loma Alta DR

City Douglas State AZ Zip Code 85607

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

Name of Employer chiricauhua com health ctr Occupation ART THERAPIS

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
 12 / 06 / 2011

Transaction ID : 3123156

Amount of Each Receipt this Period
 50.00

Elizabeth Warren Earmarks

C. Mr. John Isaacs
Full Name (Last, First, Middle Initial)

Mailing Address 2018 Pierce Mill Road NW

City Washington State DC Zip Code 20010

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

Name of Employer Council for a Livable World Occupation lobbyist

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
 12 / 02 / 2011

Transaction ID : 3120284

Amount of Each Receipt this Period
 30.00

Elizabeth Warren Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 88.34 |
| TOTAL This Period (last page this line 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 939 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Lois Schwartz | | Date of Receipt MM / DD / YYYY 12 / 01 / 2011 Transaction ID : 3120194 |
| Mailing Address 7275B St | | Amount of Each Receipt this Period 10.00 |
| City South Haven | State MI | Zip Code 49090 |
| FEC ID number of contributing federal political committee. C | | Elizabeth Warren Earmarks |
| Name of Employer DePaul University | Occupation adjunct instructor | |
| 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. Ms. Judi Fishman | | Date of Receipt MM / DD / YYYY 12 / 27 / 2011 Transaction ID : 3139531 |
| Mailing Address 923 W Webster Ave | | Amount of Each Receipt this Period 100.00 |
| City Chicago | State IL | Zip Code 60614 |
| FEC ID number of contributing federal political committee. C | | Elizabeth Warren Earmarks |
| Name of Employer Federal Street Holdings | Occupation REAL ESTATE EXEC | |
| 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. Ms. Gerrie Barclay | | Date of Receipt MM / DD / YYYY 12 / 01 / 2011 Transaction ID : 3120211 |
| Mailing Address 32241 Southfield Road | | Amount of Each Receipt this Period 50.00 |
| City Birmingham | State MI | Zip Code 48025 |
| FEC ID number of contributing federal political committee. C | | Elizabeth Warren Earmarks |
| Name of Employer Fitz Public Schls | Occupation Bilingual Coordinator | |
| 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).....▶ | 160.00 |
| 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 940 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Ms. Margaret Jean J. Cannon | | Date of Receipt 12 / 01 / 2011 Transaction ID : 3120151 |
| Mailing Address 548b Beach Road | | Amount of Each Receipt this Period 10.00 |
| City Sarasota | State FL | Zip Code 34242 |
| FEC ID number of contributing federal political committee. C | | Elizabeth Warren Earmarks |
| Name of Employer IBM | Occupation Project Manager | |
| 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. Mrs. Marianita Meyer | | Date of Receipt 12 / 27 / 2011 Transaction ID : 3139507 |
| Mailing Address 425 Park Ave. South Apt. 18C | | Amount of Each Receipt this Period 33.33 |
| City New York | State NY | Zip Code 10016 |
| FEC ID number of contributing federal political committee. C | | Elizabeth Warren Earmarks |
| Name of Employer Kreindler & Kreindler | Occupation Legal Assistant | |
| 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. Sergei Kouznetsov | | Date of Receipt 12 / 02 / 2011 Transaction ID : 3120278 |
| Mailing Address 6757 Vermar Ter | | Amount of Each Receipt this Period 10.00 |
| City Eden Prairie | State MN | Zip Code 55346 |
| FEC ID number of contributing federal political committee. C | | Elizabeth Warren Earmarks |
| Name of Employer maverick tech | Occupation engineer | |
| 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).....▶ | 53.33 |
| TOTAL This Period (last page this line 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 941 OF 2452 |
| | <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. Alice A. Kleinhans
Full Name (Last, First, Middle Initial)

Mailing Address 45 North St.

City Andover State MA Zip Code 01810

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

Name of Employer Merrimack Valley Occupation Lawyer

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
 12 / 05 / 2011

Transaction ID : 3122990

Amount of Each Receipt this Period
 100.00

Elizabeth Warren Earmarks

B. Ms. Leslie H. Pierpont
Full Name (Last, First, Middle Initial)

Mailing Address 4157 ortega blvd

City Jacksonville State FL Zip Code 32210

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

Name of Employer Native and Uncommon Plants Occupation Requested

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
 12 / 14 / 2011

Transaction ID : 3127257

Amount of Each Receipt this Period
 10.00

Elizabeth Warren Earmarks

C. Ms. Frances Y. Smith
Full Name (Last, First, Middle Initial)

Mailing Address 30667 Mystic Forest Drive

City Farmington Hill State MI Zip Code 48331

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

Name of Employer Oakland Comm. College Occupation Teacher

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
 12 / 08 / 2011

Transaction ID : 3125007

Amount of Each Receipt this Period
 16.66

Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 126.66

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 942 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Dr. Richard Schmelzer
 Full Name (Last, First, Middle Initial)
 Mailing Address 5114 Milward Drive
 City Madison State WI Zip Code 53711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PPMG Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 12 / 2011**
Transaction ID : 3127078
 Amount of Each Receipt this Period **30.00**
 Elizabeth Warren Earmarks

B. Ms. Ruth Fredericks
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Peter Cooper Rd Apt. 14E
 City New York State NY Zip Code 10010
 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 **0.00**

Date of Receipt **12 / 01 / 2011**
Transaction ID : 3120067
 Amount of Each Receipt this Period **10.00**
 Elizabeth Warren Earmarks

C. Ms. Harriet Steinberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 1731 Beacon Street, Apt. 210
 City Brookline State MA Zip Code 02445
 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 **0.00**

Date of Receipt **12 / 01 / 2011**
Transaction ID : 3120072
 Amount of Each Receipt this Period **25.00**
 Elizabeth Warren Earmarks

| | |
|---|--------------|
| SUBTOTAL of Receipts This Page (optional)..... | 65.00 |
| 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 943 OF 2452 |
| | <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. Helen Gallew
 Full Name (Last, First, Middle Initial)
 Mailing Address 123 E. 4th Street
 City Lansdale State PA Zip Code 19446
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3120149
 Amount of Each Receipt this Period
 25.00
 Elizabeth Warren Earmarks

B. Ms. Marcia Roseman
 Full Name (Last, First, Middle Initial)
 Mailing Address 6318 Warrens Way
 City Wanaque State NJ Zip Code 07465
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3120168
 Amount of Each Receipt this Period
 20.00
 Elizabeth Warren Earmarks

C. Eleanor Robison
 Full Name (Last, First, Middle Initial)
 Mailing Address 2321 Black Oak Way
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3120172
 Amount of Each Receipt this Period
 5.00
 Elizabeth Warren Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 50.00 |
| 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 944 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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 Doyno
 Full Name (Last, First, Middle Initial)
 Mailing Address 80 Meadowbrook Rd
 City Buffalo State NY Zip Code 14221
 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 0.00

Date of Receipt 12 / 01 / 2011
Transaction ID : 3120183
 Amount of Each Receipt this Period 25.00
 Elizabeth Warren Earmarks

B. Ms. Barbara D. Boggs
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 W. 147th Street # 21E
 City New York State NY Zip Code 10039
 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 0.00

Date of Receipt 12 / 01 / 2011
Transaction ID : 3120186
 Amount of Each Receipt this Period 20.00
 Elizabeth Warren Earmarks

C. Susan Oleshko
 Full Name (Last, First, Middle Initial)
 Mailing Address 287 W 5th St.
 City Deer Park State NY Zip Code 11729
 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 0.00

Date of Receipt 12 / 01 / 2011
Transaction ID : 3120196
 Amount of Each Receipt this Period 25.00
 Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 945 OF 2452 |
| | <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. Joslen Letscher
 Full Name (Last, First, Middle Initial)
 Mailing Address 41120 Fox Run, Apt. T19
 City State Zip Code
 Novi MI 48377
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3120202
 Amount of Each Receipt this Period
 25.00
 Elizabeth Warren Earmarks

B. R Masty
 Full Name (Last, First, Middle Initial)
 Mailing Address 975 Holly St.
 City State Zip Code
 Bullhead City AZ 86442
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3120208
 Amount of Each Receipt this Period
 10.00
 Elizabeth Warren Earmarks

C. Mr. Peter Lemkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 14825 Keeneland Circle
 City State Zip Code
 North Potomac MD 20878
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3120217
 Amount of Each Receipt this Period
 5.00
 Elizabeth Warren Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 40.00 |
| 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 946 OF 2452 |
| | <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. Lyda Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 6814 S Dennis Dr.
 City Tempe State AZ Zip Code 85283
 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 0.00

Date of Receipt 12 / 02 / 2011
Transaction ID : 3120232
 Amount of Each Receipt this Period 25.00
 Elizabeth Warren Earmarks

B. Mr. William Kornfeld
 Full Name (Last, First, Middle Initial)
 Mailing Address 1304 Bobbi Ct.
 City Bowling Green State KY Zip Code 42103
 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 0.00

Date of Receipt 12 / 02 / 2011
Transaction ID : 3120235
 Amount of Each Receipt this Period 33.35
 Elizabeth Warren Earmarks

C. Ms. Carlyn Halde
 Full Name (Last, First, Middle Initial)
 Mailing Address 63 Park Hill Ave.
 City San Francisco State CA Zip Code 94117
 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 0.00

Date of Receipt 12 / 02 / 2011
Transaction ID : 3120241
 Amount of Each Receipt this Period 50.00
 Elizabeth Warren Earmarks

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 108.35 |
| TOTAL This Period (last page this line 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 947 OF 2452 |
| | (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. N. Laura Middleton M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 Windridge Rd.
 City Essex Junction State VT Zip Code 05452
 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 ▼ 0.00

Date of Receipt
 12 / 02 / 2011
Transaction ID : 3120247
 Amount of Each Receipt this Period
 83.33
 Elizabeth Warren Earmarks

B. Mr. Ken Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 965 Kelly Blvd
 City Springfield State OR Zip Code 97477
 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 ▼ 0.00

Date of Receipt
 12 / 02 / 2011
Transaction ID : 3120259
 Amount of Each Receipt this Period
 10.00
 Elizabeth Warren Earmarks

C. Ms. Isabel Labriola
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 10794
 City Zephyr Cove State NV Zip Code 89448
 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 ▼ 0.00

Date of Receipt
 12 / 02 / 2011
Transaction ID : 3120268
 Amount of Each Receipt this Period
 20.00
 Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 113.33
TOTAL This Period (last page this line 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 948 OF 2452 |
| | (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. Harriette C. Buchanan
 Full Name (Last, First, Middle Initial)
 Mailing Address 194 Eastview Dr.
 City Boone State NC Zip Code 28607
 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 ▼ 0.00

Date of Receipt 12 / 05 / 2011
Transaction ID : 3122996
 Amount of Each Receipt this Period 20.00
 Elizabeth Warren Earmarks

B. Ms. Judith Wilcox
 Full Name (Last, First, Middle Initial)
 Mailing Address 26988 Heatherford Dr., Apt. 3
 City Perrysburg State OH Zip Code 43551
 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 ▼ 0.00

Date of Receipt 12 / 05 / 2011
Transaction ID : 3123002
 Amount of Each Receipt this Period 6.66
 Elizabeth Warren Earmarks

C. Ms. Patricia S. Byard
 Full Name (Last, First, Middle Initial)
 Mailing Address 3615 Maidu Pl.
 City Davis State CA Zip Code 95618
 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 ▼ 0.00

Date of Receipt 12 / 05 / 2011
Transaction ID : 3123008
 Amount of Each Receipt this Period 100.00
 Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional).....▶ 126.66
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 949 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Ms. Muriel I. Patterson | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123014 |
| Mailing Address 900 Hill Street | | Amount of Each Receipt this Period 10.00 |
| City Broomfield | State CO | Zip Code 80023 |
| FEC ID number of contributing federal political committee. C | | Elizabeth Warren Earmarks |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr. Michael Burt | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123020 |
| Mailing Address 505 13th St. SE, Apt. 1 | | Amount of Each Receipt this Period 100.00 |
| City Washington | State DC | Zip Code 20003 |
| FEC ID number of contributing federal political committee. C | | Elizabeth Warren Earmarks |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. M. J. McAdam | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123026 |
| Mailing Address 710 Bird Bay Dr W | | Amount of Each Receipt this Period 20.00 |
| City Venice | State FL | Zip Code 34285 |
| FEC ID number of contributing federal political committee. C | | Elizabeth Warren Earmarks |
| 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 ▼ 0.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 130.00 |
| 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 950 OF 2452 |
| | <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 House
Full Name (Last, First, Middle Initial)
Mailing Address 699 Lost River Road

| | | |
|----------------|-------------|-------------------|
| City Mazama | State WA | Zip Code 98833 |
|----------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 05 | / | 2011 |

Transaction ID : 3123038

Amount of Each Receipt this Period

| |
|------|
| 0.00 |
|------|

 Elizabeth Warren Earmarks

B. Ms. Ruth Mayerson
Full Name (Last, First, Middle Initial)
Mailing Address 5021 Noeline Avenue

| | | |
|----------------|-------------|-------------------|
| City Encino | State CA | Zip Code 91436 |
|----------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 05 | / | 2011 |

Transaction ID : 3123044

Amount of Each Receipt this Period

| |
|-------|
| 25.00 |
|-------|

 Elizabeth Warren Earmarks

C. John W. Bakhuls
Full Name (Last, First, Middle Initial)
Mailing Address 6 Scottsdale Way # 1

| | | |
|----------------|-------------|-------------------|
| City Novato | State CA | Zip Code 94947 |
|----------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 05 | / | 2011 |

Transaction ID : 3123057

Amount of Each Receipt this Period

| |
|-------|
| 10.00 |
|-------|

 Elizabeth Warren Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 55.00 |
| 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 951 OF 2452 |
| | (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. Eva Kelley

Mailing Address 760 N 2nd St., Apt. 18

City Paragould State AR Zip Code 72450

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 ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : 3123063

Amount of Each Receipt this Period
2.00

Elizabeth Warren Earmarks

Full Name (Last, First, Middle Initial)
B. Mr. William Guthrie

Mailing Address 301 Aden Ct.

City Upper Marlboro State MD Zip Code 20774

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 ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : 3123069

Amount of Each Receipt this Period
4.20

Elizabeth Warren Earmarks

Full Name (Last, First, Middle Initial)
C. Ms. Betsi Bilyck

Mailing Address 230 Dolores St Apt 108

City San Francisco State CA Zip Code 94103

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 ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : 3123084

Amount of Each Receipt this Period
10.00

Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... **16.20**

TOTAL This Period (last page this line 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 952 OF 2452 |
| | (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. Pat Sibley | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2011 |
| Mailing Address 118 SW 116th Street Apt. D24 | | Transaction ID : 3123090 |
| City Seattle | State WA | Zip Code 98146 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 2.00 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Elizabeth Warren Earmarks |
| 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. Ms. Dolores McCullough | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2011 |
| Mailing Address 21415 33rd Ave. | | Transaction ID : 3123134 |
| City Bayside | State NY | Zip Code 11361 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 10.00 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Elizabeth Warren Earmarks |
| 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. Carol Detweiler | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2011 |
| Mailing Address 1704 Shadford Rd. | | Transaction ID : 3123142 |
| City Ann Arbor | State MI | Zip Code 48104 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50.00 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Elizabeth Warren Earmarks |
| 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).....▶ | 62.00 |
| 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 953 OF 2452 |
| | (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. Mr. Curtis J. Eaton
Full Name (Last, First, Middle Initial)

Mailing Address 622 Hall Blvd

City Mason State MI Zip Code 48854

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011

Transaction ID : 3123150

Amount of Each Receipt this Period
 20.00

Elizabeth Warren Earmarks

B. Mr. Rowland Bell
Full Name (Last, First, Middle Initial)

Mailing Address 606 Fords Landing Way

City Alexandria State VA Zip Code 22314

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123415

Amount of Each Receipt this Period
 200.00

Elizabeth Warren Earmarks

C. Mrs. Katherine Horowitz
Full Name (Last, First, Middle Initial)

Mailing Address 2173 Glenkirk Drive

City San Jose State CA Zip Code 95124

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123427

Amount of Each Receipt this Period
 20.00

Elizabeth Warren Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 240.00 |
| 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 954 OF 2452 |
| | (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. Betty Armstrong
Full Name (Last, First, Middle Initial)
Mailing Address 16221 SE 29th St
City Bellevue State WA Zip Code 98008
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 ▼ 0.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123458
Amount of Each Receipt this Period 16.66
Elizabeth Warren Earmarks

B. Ms. Laurie K. Mitchell
Full Name (Last, First, Middle Initial)
Mailing Address 1414 Magers Landing Road
City Monkton State MD Zip Code 21111
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 ▼ 0.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123465
Amount of Each Receipt this Period 25.00
Elizabeth Warren Earmarks

C. Robert E. Laveine
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 412
City West Burlington State IA Zip Code 52655
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 ▼ 0.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123468
Amount of Each Receipt this Period 100.00
Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional).....▶ 141.66
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 955 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Joyce Goodman
Full Name (Last, First, Middle Initial)
Mailing Address 1140 5th Avenue
City New York State NY Zip Code 10128
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 0.00

Date of Receipt 12 / 07 / 2011
Transaction ID : 3123474
Amount of Each Receipt this Period 100.00
Elizabeth Warren Earmarks

B. Ms. Charlotte Pera
Full Name (Last, First, Middle Initial)
Mailing Address 437 Jeter St
City Redwood City State CA Zip Code 94062
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 0.00

Date of Receipt 12 / 07 / 2011
Transaction ID : 3123480
Amount of Each Receipt this Period 50.00
Elizabeth Warren Earmarks

C. Ms. Constance Counts
Full Name (Last, First, Middle Initial)
Mailing Address 8 Hancock Ave
City Lexington State MA Zip Code 02420
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 0.00

Date of Receipt 12 / 07 / 2011
Transaction ID : 3123483
Amount of Each Receipt this Period 100.00
Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 956 OF 2452 |
| | <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. Marilyn Hotaling
Full Name (Last, First, Middle Initial)

Mailing Address 305 E. Twelve Mile Road

City Royal Oak State MI Zip Code 48073

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3123802

Amount of Each Receipt this Period
 10.00

Elizabeth Warren Earmarks

B. Mr. Robert Edwards
Full Name (Last, First, Middle Initial)

Mailing Address 1036 N.W. 1st Avenue

City Homestead State FL Zip Code 33030

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011
Transaction ID : 3123803

Amount of Each Receipt this Period
 20.00

Elizabeth Warren Earmarks

C. Mr. Patrick Conley
Full Name (Last, First, Middle Initial)

Mailing Address 7527 Lone Eagle Dr

City Murfreesboro State TN Zip Code 37128

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3124999

Amount of Each Receipt this Period
 30.00

Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

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 958 OF 2452
(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. Catheine O'Connor
 Mailing Address 429 Josiah Bartlett Rd.
 City State Zip Code
 Concord NH 03301
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125050
 Amount of Each Receipt this Period
 3.33
 Elizabeth Warren Earmarks

Full Name (Last, First, Middle Initial)
B. Mr. Carl Duzen
 Mailing Address 520 Kathmere Road
 City State Zip Code
 Havertown PA 19083
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125068
 Amount of Each Receipt this Period
 50.00
 Elizabeth Warren Earmarks

Full Name (Last, First, Middle Initial)
C. Mr. John Quirk
 Mailing Address 19103 Pala Mesa Place
 City State Zip Code
 Porter Ranch CA 91326
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3126554
 Amount of Each Receipt this Period
 100.00
 Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 153.33
TOTAL This Period (last page this line 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 959 OF 2452 |
| | <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 Bloss
Full Name (Last, First, Middle Initial)
Mailing Address 2323 Simpson St.
City Evanston State IL Zip Code 60201
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 **0.00**

Date of Receipt **12 / 09 / 2011**
Transaction ID : 3126558
Amount of Each Receipt this Period **2.50**
Elizabeth Warren Earmarks

B. Ms. Joan Kowalski
Full Name (Last, First, Middle Initial)
Mailing Address 54275 Bradshaw DR
City New Baltimore State MI Zip Code 48047
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 **0.00**

Date of Receipt **12 / 09 / 2011**
Transaction ID : 3126565
Amount of Each Receipt this Period **8.35**
Elizabeth Warren Earmarks

C. Ms. Carole C. Allen
Full Name (Last, First, Middle Initial)
Mailing Address 180 Montana Drive
City Danville State CA Zip Code 94526
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 **0.00**

Date of Receipt **12 / 09 / 2011**
Transaction ID : 3126571
Amount of Each Receipt this Period **2.50**
Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... **13.35**
TOTAL This Period (last page this line 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 960 OF 2452 |
| | <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. Betty S. Tunstall | | Date of Receipt 12 / 09 / 2011 Transaction ID : 3126590 |
| Mailing Address PO Box 1091 | | Amount of Each Receipt this Period 10.00 |
| City Black Canyon City | State AZ | Zip Code 85324 |
| FEC ID number of contributing federal political committee. C | | Elizabeth Warren Earmarks |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr. John R. Brady | | Date of Receipt 12 / 09 / 2011 Transaction ID : 3126604 |
| Mailing Address 2609 Waverly Dr. | | Amount of Each Receipt this Period 100.00 |
| City Los Angeles | State CA | Zip Code 90039 |
| FEC ID number of contributing federal political committee. C | | Elizabeth Warren Earmarks |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Nancy J. Doolittle | | Date of Receipt 12 / 09 / 2011 Transaction ID : 3126606 |
| Mailing Address 572 Spencer Road | | Amount of Each Receipt this Period 20.00 |
| City Candor | State NY | Zip Code 13743 |
| FEC ID number of contributing federal political committee. C | | Elizabeth Warren Earmarks |
| 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 ▼ 0.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 130.00 |
| 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 961 OF 2452
(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. Laura Steele
 Full Name (Last, First, Middle Initial)
 Mailing Address 10509 Hutting Pl.
 City Silver Spring State MD Zip Code 20902
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3126609
 Amount of Each Receipt this Period
 20.00
 Elizabeth Warren Earmarks

B. Ms. Dorothea R. Crisp
 Full Name (Last, First, Middle Initial)
 Mailing Address 1245 SW Walking Wood
 City Depoe Bay State OR Zip Code 97341
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3126615
 Amount of Each Receipt this Period
 20.00
 Elizabeth Warren Earmarks

C. Bernardo Hollman
 Full Name (Last, First, Middle Initial)
 Mailing Address 10237 Autumnview Ln
 City San Diego State CA Zip Code 92126
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011
Transaction ID : 3127087
 Amount of Each Receipt this Period
 2.00
 Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 42.00
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 962 OF 2452 |
| | <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. Beatrice Weinstein
Full Name (Last, First, Middle Initial)

Mailing Address 35 Willow Gate

City Roslyn Heights State NY Zip Code 11577

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011

Transaction ID : 3127092

Amount of Each Receipt this Period
 50.00

Elizabeth Warren Earmarks

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

Mailing Address 240 Central Park S.

City New York State NY Zip Code 10019

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011

Transaction ID : 3127099

Amount of Each Receipt this Period
 12.50

Elizabeth Warren Earmarks

C. Mr. Peter Henning
Full Name (Last, First, Middle Initial)

Mailing Address 8485 Hunts Point Ln

City Hunts Point State WA Zip Code 98004

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011

Transaction ID : 3127134

Amount of Each Receipt this Period
 10.00

Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 72.50

TOTAL This Period (last page this line 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 963 OF 2452 |
| | <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. Carolyn Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 7409 Flower Ave.
 City Takoma Park State MD Zip Code 20912
 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 ▼ 0.00

Date of Receipt
 12 / 14 / 2011
Transaction ID : 3127268
 Amount of Each Receipt this Period
 25.00
 Elizabeth Warren Earmarks

B. Ms. Carol Cooper
 Full Name (Last, First, Middle Initial)
 Mailing Address 58 Grandview Ave.
 City Kingston State NY Zip Code 12401
 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 ▼ 0.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3129892
 Amount of Each Receipt this Period
 10.00
 Elizabeth Warren Earmarks

C. Ms. Nancy Richards
 Full Name (Last, First, Middle Initial)
 Mailing Address 5207 Church Drive
 City Charleston State WV Zip Code 25306
 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 ▼ 0.00

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3129906
 Amount of Each Receipt this Period
 20.00
 Elizabeth Warren Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 55.00 |
| 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 964 OF 2452 |
| | <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. Martha C. Brown
Full Name (Last, First, Middle Initial)
Mailing Address 6879 Highway 49 N.
City Mariposa State CA Zip Code 95338
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 0.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129919
Amount of Each Receipt this Period 250.00
Elizabeth Warren Earmarks

B. Ms. Barbara Carr
Full Name (Last, First, Middle Initial)
Mailing Address 3266 Chamberlain Cir.
City Ann Arbor State MI Zip Code 48103
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 0.00

Date of Receipt 12 / 16 / 2011
Transaction ID : 3131720
Amount of Each Receipt this Period 100.00
Elizabeth Warren Earmarks

C. W. R. Greer
Full Name (Last, First, Middle Initial)
Mailing Address 307 Scottholm Blvd
City Syracuse State NY Zip Code 13224
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 0.00

Date of Receipt 12 / 16 / 2011
Transaction ID : 3131724
Amount of Each Receipt this Period 4.00
Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... **354.00**
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 965 OF 2452 |
| <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

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Ms. Charlotte Alexandre | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 10345 Adams Pl | | Transaction ID : 3131725 |
| City Thornton | State CO | Zip Code 80229 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 0.00 |
| Name of Employer REQUESTED | Occupation REQUESTED | Elizabeth Warren Earmarks |
| 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. Mr. Frederick Phillips | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 1939 Jefferson St., Apt. 101 | | Transaction ID : 3131739 |
| City Hollywood | State FL | Zip Code 33020 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2.50 |
| Name of Employer REQUESTED | Occupation REQUESTED | Elizabeth Warren Earmarks |
| 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. Mithlesh Prakash | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 2665 Condor Cir | | Transaction ID : 3131755 |
| City Corona | State CA | Zip Code 92882 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 8.50 |
| Name of Employer REQUESTED | Occupation REQUESTED | Elizabeth Warren Earmarks |
| 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).....▶ | 21.00 |
| 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 966 OF 2452
(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. Barry S. Weyburn
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 388
 City State Zip Code
 Rock Hall MD 21661
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131762
 Amount of Each Receipt this Period
 50.00
 Elizabeth Warren Earmarks

B. Ms. Louise Weschler
 Full Name (Last, First, Middle Initial)
 Mailing Address 161 Richdale Rd
 City State Zip Code
 Colts Neck NJ 07722
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131779
 Amount of Each Receipt this Period
 25.00
 Elizabeth Warren Earmarks

C. Ms. Ellen M. Tirone
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 Edendale Ln
 City State Zip Code
 Durham NH 03824
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131785
 Amount of Each Receipt this Period
 10.00
 Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 967 OF 2452 |
| | (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

Full Name (Last, First, Middle Initial)
A. Ms. Charlotte Stone

Mailing Address 2428 Sandell Dr

City Atlanta State GA Zip Code 30338

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 ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3132271

Amount of Each Receipt this Period
25.00

Elizabeth Warren Earmarks

Full Name (Last, First, Middle Initial)
B. Ms. Chrystyne Braaten

Mailing Address 1222 SW Leschi DR

City Oak Harbor State WA Zip Code 98277

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 ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3132533

Amount of Each Receipt this Period
2.00

Elizabeth Warren Earmarks

Full Name (Last, First, Middle Initial)
C. Ms. Bernice R. Horn

Mailing Address 929 Stratford Avenue

City Melrose Park State PA Zip Code 19027

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 ▼ **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3132538

Amount of Each Receipt this Period
25.00

Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ **52.00**

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 968 OF 2452 |
| | <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. Carl Weinberg
Full Name (Last, First, Middle Initial)

Mailing Address 42 Green Oaks Ct.

City Walnut Creek State CA Zip Code 94596

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3132550

Amount of Each Receipt this Period
 20.00

Elizabeth Warren Earmarks

B. Ms. Judy Hunter
Full Name (Last, First, Middle Initial)

Mailing Address 3586 Indigo Pond Dr

City Palm Harbor State FL Zip Code 34685

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 3132553

Amount of Each Receipt this Period
 1.66

Elizabeth Warren Earmarks

C. Ms. Clair A. Sharpless
Full Name (Last, First, Middle Initial)

Mailing Address 1 Drumlin Rd.

City West Simsbury State CT Zip Code 6092

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

Name of Employer REQUESTED Occupation Homemaker

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
 12 / 20 / 2011

Transaction ID : 3132579

Amount of Each Receipt this Period
 100.00

Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 121.66

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: | PAGE 969 OF 2452 |
| | (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. Nancy Anderson
Full Name (Last, First, Middle Initial)
Mailing Address 245 N Vine St Apt 903

| | | |
|------------------------|-------------|-------------------|
| City Salt Lake City | State UT | Zip Code 84103 |
|------------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 21 | / | 2011 |

Transaction ID : 3133750

Amount of Each Receipt this Period

| |
|------|
| 0.00 |
|------|

Elizabeth Warren Earmarks

B. Ms. Nancy Boney
Full Name (Last, First, Middle Initial)
Mailing Address 10 Allen Road

| | | |
|---------------------|-------------|-------------------|
| City Bridgewater | State NJ | Zip Code 08807 |
|---------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 21 | / | 2011 |

Transaction ID : 3133755

Amount of Each Receipt this Period

| |
|-------|
| 12.50 |
|-------|

Elizabeth Warren Earmarks

C. Ms. Eleanor T. Weiss
Full Name (Last, First, Middle Initial)
Mailing Address 360 Osgood Road

| | | |
|-----------------|-------------|-------------------|
| City Milford | State NH | Zip Code 03055 |
|-----------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 22 | / | 2011 |

Transaction ID : 3133763

Amount of Each Receipt this Period

| |
|-------|
| 30.00 |
|-------|

Elizabeth Warren Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 52.50 |
| TOTAL This Period (last page this line 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 970 OF 2452 |
| | (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. Mrs. Marian Ryan
Full Name (Last, First, Middle Initial)

Mailing Address 2460 Linette Ct

City Yorktown Heights State NY Zip Code 10598

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011

Transaction ID : 3133771

Amount of Each Receipt this Period
 20.00

Elizabeth Warren Earmarks

B. Ms. Natalie Grigg
Full Name (Last, First, Middle Initial)

Mailing Address 92 Lakeshore Road

City Boxford State MA Zip Code 01921

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

Name of Employer REQUESTED Occupation Housewife/farmer

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
 12 / 27 / 2011

Transaction ID : 3139497

Amount of Each Receipt this Period
 100.00

Elizabeth Warren Earmarks

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

Mailing Address 73 5th Avenue

City San Francisco State CA Zip Code 94118

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011

Transaction ID : 3139508

Amount of Each Receipt this Period
 50.00

Elizabeth Warren Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 170.00 |
| 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 971 OF 2452 |
| | (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. Patricia Froman | | Date of Receipt 12 / 27 / 2011 Transaction ID : 3139519 |
| Mailing Address 214 Parliament Dr. | | Amount of Each Receipt this Period 40.00 |
| City Coraopolis | State PA | Zip Code 15108 |
| FEC ID number of contributing federal political committee. C | | Elizabeth Warren Earmarks |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr. Michael Seligman | | Date of Receipt 12 / 27 / 2011 Transaction ID : 3139524 |
| Mailing Address 2700 Exeter Pl. | | Amount of Each Receipt this Period 50.00 |
| City Santa Barbara | State CA | Zip Code 93105 |
| FEC ID number of contributing federal political committee. C | | Elizabeth Warren Earmarks |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Mary Niccolls | | Date of Receipt 12 / 27 / 2011 Transaction ID : 3139542 |
| Mailing Address 1830 Garden Dr. | | Amount of Each Receipt this Period 40.00 |
| City Medford | State OR | Zip Code 97504 |
| FEC ID number of contributing federal political committee. C | | Elizabeth Warren Earmarks |
| 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 ▼ 0.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 110.00 |
| 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 972 OF 2452
(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. Sherri L. Burr
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 27223
 City Albuquerque State NM Zip Code 87125
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : 3139554
 Amount of Each Receipt this Period
 6.00
 Elizabeth Warren Earmarks

B. Ms. Katha D. Massey
 Full Name (Last, First, Middle Initial)
 Mailing Address 270 Victoria Street
 City Commerce State GA Zip Code 30529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation Librarian
 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
 12 / 29 / 2011
Transaction ID : 3139561
 Amount of Each Receipt this Period
 50.00
 Elizabeth Warren Earmarks

C. Ms. Colleen B. Dipaul
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 95
 City Rector State PA Zip Code 15677
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : 3139562
 Amount of Each Receipt this Period
 15.00
 Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 71.00
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 973 OF 2452 |
| | <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. Nessa Peters
Full Name (Last, First, Middle Initial)
Mailing Address 1010 cannn road
City silver spring State MD Zip Code 20904
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 ▼ 0.00

Date of Receipt 12 / 14 / 2011
Transaction ID : 3127262
Amount of Each Receipt this Period 20.00
Elizabeth Warren Earmarks

B. Ms. Marciarose Shestack
Full Name (Last, First, Middle Initial)
Mailing Address 2201 Pennsylvania Avenue
City Philadelphia State PA Zip Code 19130
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation TV anchor journalist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 19 / 2011
Transaction ID : 3131773
Amount of Each Receipt this Period 16.66
Elizabeth Warren Earmarks

C. Ms. Judith Rogovin
Full Name (Last, First, Middle Initial)
Mailing Address 4566 Forest Wood Trl
City Sarasota State FL Zip Code 34241
FEC ID number of contributing federal political committee. **C**
Name of Employer Saint Paul Public Schls Occupation Teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 20 / 2011
Transaction ID : 3132562
Amount of Each Receipt this Period 0.83
Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 37.49
TOTAL This Period (last page this line 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 974 OF 2452 |
| | <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. Mr. Andrew Carson
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 709

City State Zip Code
Wilson WY 83014

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

Name of Employer Occupation
self mtn guide

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
12 / 01 / 2011

Transaction ID : 3120165

Amount of Each Receipt this Period
0.00

Elizabeth Warren Earmarks

B. Mr. Phillip S. Berry
Full Name (Last, First, Middle Initial)

Mailing Address 4510 Canyon Road

City State Zip Code
Lafayette CA 94549

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

Name of Employer Occupation
Self Lawyer

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
12 / 05 / 2011

Transaction ID : 3123035

Amount of Each Receipt this Period
500.00

Elizabeth Warren Earmarks

C. Ms. Clairan Ferrono
Full Name (Last, First, Middle Initial)

Mailing Address 5432 S Dorchester Ave.

City State Zip Code
Chicago IL 60615

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

Name of Employer Occupation
Self Artist

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
12 / 27 / 2011

Transaction ID : 3139545

Amount of Each Receipt this Period
50.00

Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 560.00

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 975 OF 2452 |
| | (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. Mr. Richard R. Gray
Full Name (Last, First, Middle Initial)

Mailing Address 131 Riverside Dr., 1-A

City New York State NY Zip Code 10024

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

Name of Employer self-employed Occupation consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011

Transaction ID : 3120157

Amount of Each Receipt this Period
 100.00

Elizabeth Warren Earmarks

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

Mailing Address 78 Knapp ave apt b

City Clifton State NJ Zip Code 07011

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

Name of Employer Sika Corporation Occupation mail clerk

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
 12 / 06 / 2011

Transaction ID : 3123165

Amount of Each Receipt this Period
 10.00

Elizabeth Warren Earmarks

C. Ms. Viviana Sanchez
Full Name (Last, First, Middle Initial)

Mailing Address 1119 19 th street

City Bellingham State WA Zip Code 98225

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

Name of Employer St. Joseph Hospital Occupation Social Worker

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
 12 / 13 / 2011

Transaction ID : 3127128

Amount of Each Receipt this Period
 5.00

Elizabeth Warren Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.00

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 976 OF 2452 |
| | <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. Cynthia Brantley
Full Name (Last, First, Middle Initial)
Mailing Address 3100 Shelter Cove Pl
City State Zip Code
Davis CA 95616
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
U of CA Professor
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123050
Amount of Each Receipt this Period
25.00
Elizabeth Warren Earmarks

B. Ms. Anne Campbell
Full Name (Last, First, Middle Initial)
Mailing Address 1210 Spruce Street
City State Zip Code
Philadelphia PA 19107
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
U of PA analyst
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 12 / 2011
Transaction ID : 3127105
Amount of Each Receipt this Period
150.00
Elizabeth Warren Earmarks

C. Ms. Martha Stampfer
Full Name (Last, First, Middle Initial)
Mailing Address 7290 Sayre Drive
City State Zip Code
Oakland CA 94611
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
U. California biologist
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 09 / 2011
Transaction ID : 3126577
Amount of Each Receipt this Period
20.00
Elizabeth Warren Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 195.00 |
| 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 977 OF 2452 |
| | <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. Dr. Susan S. Kirschenbaum
 Full Name (Last, First, Middle Initial)
 Mailing Address 1783 South Rd.
 City Kingston State RI Zip Code 02881
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U.S. Navy, NVWC Occupation Eng. Psychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129898
 Amount of Each Receipt this Period 100.00
 Elizabeth Warren Earmarks

B. Mary Louise Sejda
 Full Name (Last, First, Middle Initial)
 Mailing Address 6228 Forest Ave.
 City Hammond State IN Zip Code 46324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNIV OF CHICAGO HOSPITALS Occupation ASST DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 09 / 2011
Transaction ID : 3126596
 Amount of Each Receipt this Period 20.00
 Elizabeth Warren Earmarks

C. Mr. Robert H. Schor
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Ambassador Drive
 City Rochester State NY Zip Code 14610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Pittsburgh Occupation Faculty
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 20 / 2011
Transaction ID : 3132568
 Amount of Each Receipt this Period 166.66
 Elizabeth Warren Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 286.66 |
| 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 978 OF 2452 |
| | <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. Margaret A. Hefner
 Full Name (Last, First, Middle Initial)
 Mailing Address 715 N Price Rd
 City Olivette State MO Zip Code 63132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Saint Louis University Occupation Genetic Counselor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 24 / 2011
Transaction ID : 3135476
 Amount of Each Receipt this Period
 100.00
 Gloria Negrete McLeod

B. Ms. Joanne Lyman
 Full Name (Last, First, Middle Initial)
 Mailing Address 163 East 81 St Street
 City NYC State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation designer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 01 / 2011
Transaction ID : 3119269
 Amount of Each Receipt this Period
 50.00
 Lois Capps Earmark Contributions

C. Ms. Lillian P Davis
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 Boulder Rd
 City Plymouth Meeting State PA Zip Code 19462
 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 ▼ 0.00

Date of Receipt
 12 / 19 / 2011
Transaction ID : 3131749
 Amount of Each Receipt this Period
 5.00
 Lois Frankel Earmarked Contributions

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 155.00 |
| 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 979 OF 2452 |
| | <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. Carl Duzen
Full Name (Last, First, Middle Initial)

Mailing Address 520 Kathmere Road

City Havertown State PA Zip Code 19083

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 ▼ 0.00

Date of Receipt
12 / 08 / 2011
Transaction ID : 3125073

Amount of Each Receipt this Period
50.00

Lois Frankel Earmarked Contributions

B. Ms. Elizabeth Nicolls
Full Name (Last, First, Middle Initial)

Mailing Address 800 S 15th St Unit 1631

City Sebring State OH Zip Code 44672

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 ▼ 0.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3131732

Amount of Each Receipt this Period
14.29

Lois Frankel Earmarked Contributions

C. Ms. Cynthia A. Arnold
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 14473

City San Francisco State CA Zip Code 94114

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 ▼ 0.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3131766

Amount of Each Receipt this Period
25.00

Lois Frankel Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 89.29

TOTAL This Period (last page this line 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 980 OF 2452 |
| | <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. Martha Stampfer
Full Name (Last, First, Middle Initial)
Mailing Address 7290 Sayre Drive

| | | |
|-----------------|-------------|-------------------|
| City Oakland | State CA | Zip Code 94611 |
|-----------------|-------------|-------------------|

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

| | |
|-----------------------------------|-------------------------|
| Name of Employer U. California | Occupation biologist |
|-----------------------------------|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 09 / 2011
Transaction ID : 3126583

Amount of Each Receipt this Period
20.00

Lois Frankel Earmarked Contributions

B. Ms. Paula Pippin
Full Name (Last, First, Middle Initial)
Mailing Address 23257 Willow Creek Ln

| | | |
|--------------------|-------------|-------------------|
| City California | State MD | Zip Code 20619 |
|--------------------|-------------|-------------------|

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

| | |
|-------------------------------|-------------------------------|
| Name of Employer REQUESTED | Occupation Retired teacher |
|-------------------------------|-------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123075

Amount of Each Receipt this Period
30.00

Maria Cantwell Earmarked Contributions

C. Mr. Carl Duzen
Full Name (Last, First, Middle Initial)
Mailing Address 520 Kathmere Road

| | | |
|-------------------|-------------|-------------------|
| City Havertown | State PA | Zip Code 19083 |
|-------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt
12 / 08 / 2011
Transaction ID : 3125076

Amount of Each Receipt this Period
50.00

Mazie Hirono Earmarks

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 100.00 |
| 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 981 OF 2452 |
| | <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. Elizabeth Niccolls
Full Name (Last, First, Middle Initial)

Mailing Address 800 S 15th St Unit 1631

City Sebring State OH Zip Code 44672

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3131735

Amount of Each Receipt this Period
 14.28

Mazie Hirono Earmarks

B. Ms. Cynthia A. Arnold
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 14473

City San Francisco State CA Zip Code 94114

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3131769

Amount of Each Receipt this Period
 25.00

Mazie Hirono Earmarks

C. Ms. Martha Stampfer
Full Name (Last, First, Middle Initial)

Mailing Address 7290 Sayre Drive

City Oakland State CA Zip Code 94611

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

Name of Employer U. California Occupation biologist

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
 12 / 09 / 2011

Transaction ID : 3126586

Amount of Each Receipt this Period
 20.00

Mazie Hirono Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 59.28

TOTAL This Period (last page this line 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 982 OF 2452 |
| | <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. Craig L Auster
Full Name (Last, First, Middle Initial)

Mailing Address 70 I Street SE Apt. 803

City Washington State DC Zip Code 20003

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

Name of Employer Occupation
USAction Development & Politi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3132494

Amount of Each Receipt this Period
10.00

Michelle Lujan Grisham Earmarks

B. Ms. Paula Pippin
Full Name (Last, First, Middle Initial)

Mailing Address 23257 Willow Creek Ln

City California State MD Zip Code 20619

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

Name of Employer Occupation
REQUESTED Retired teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123077

Amount of Each Receipt this Period
30.00

Shelley Berkley Senate Earmark Cntrbs

C. Mr. Carl Duzen
Full Name (Last, First, Middle Initial)

Mailing Address 520 Kathmere Road

City Havertown State PA Zip Code 19083

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 ▼
0.00

Date of Receipt
12 / 08 / 2011
Transaction ID : 3125078

Amount of Each Receipt this Period
50.00

Shelley Berkley Senate Earmark Cntrbs

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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 983 OF 2452 |
| | <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. Elizabeth Niccolls
Full Name (Last, First, Middle Initial)

Mailing Address 800 S 15th St Unit 1631

City Sebring State OH Zip Code 44672

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3131737

Amount of Each Receipt this Period
 14.28

Shelley Berkley Senate Earmark Cntrbs

B. Ms. Cynthia A. Arnold
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 14473

City San Francisco State CA Zip Code 94114

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3131771

Amount of Each Receipt this Period
 25.00

Shelley Berkley Senate Earmark Cntrbs

C. Ms. Martha Stampfer
Full Name (Last, First, Middle Initial)

Mailing Address 7290 Sayre Drive

City Oakland State CA Zip Code 94611

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

Name of Employer U. California Occupation biologist

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
 12 / 09 / 2011

Transaction ID : 3126588

Amount of Each Receipt this Period
 20.00

Shelley Berkley Senate Earmark Cntrbs

SUBTOTAL of Receipts This Page (optional)..... ▶ 59.28

TOTAL This Period (last page this line 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 984 OF 2452 |
| | <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. Shelley Rubin
Full Name (Last, First, Middle Initial)

Mailing Address 502 Park Avenue PH25
PH 25

City New York State NY Zip Code 10022

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 ▼
0.00

Date of Receipt
12 / 14 / 2011
Transaction ID : 3128087

Amount of Each Receipt this Period
1500.00

Susan Bysiewicz Earmarks

B. Ms. Sheila Toabe Davis
Full Name (Last, First, Middle Initial)

Mailing Address 7913 Vantage Ave

City North Hollywood State CA Zip Code 91605

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 ▼
0.00

Date of Receipt
12 / 21 / 2011
Transaction ID : 3133956

Amount of Each Receipt this Period
54.00

Susan Bysiewicz Earmarks

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

Mailing Address 107 Lakeview Drive

City Yorktown State VA Zip Code 23692

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 ▼
0.00

Date of Receipt
12 / 27 / 2011
Transaction ID : 3135937

Amount of Each Receipt this Period
10.00

Susan Bysiewicz Earmarks

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1564.00 |
| 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 985 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Mr. Peter Brown | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2011 |
| Mailing Address 2012 Blue Mount Road | | Transaction ID : 3138719 |
| City Monkton | State MD | Zip Code 21111 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| Name of Employer n/a | Occupation Retired | Susan Bysiewicz Earmarks |
| 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. Dr. Cordelia Ontiveros | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2011 |
| Mailing Address 1450 E. North Hills Dr. | | Transaction ID : 3135606 |
| City La Habra | State CA | Zip Code 90631 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer Cal State Univ | Occupation Univ Admin | Susan Bysiewicz Earmarks |
| 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. Ms. Marcia L Hoffer | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 29 / 2011 |
| Mailing Address 169 Mathewson Rd | | Transaction ID : 3137920 |
| City Barrington | State RI | Zip Code 02806 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| Name of Employer E H Ashley & Co Inc | Occupation Executive | Susan Bysiewicz Earmarks |
| 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).....▶ | 150.00 |
| 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 986 OF 2452
(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. Donna Kahn

Mailing Address 726 Wolf Hill Rd

City Hillsdale State NY Zip Code 12529

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

Name of Employer JacksonLewis LLP Occupation Attorney

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
 12 / 23 / 2011
Transaction ID : 3135489

Amount of Each Receipt this Period
 100.00

Susan Bysiewicz Earmarks

Full Name (Last, First, Middle Initial)
B. Ms. Eva K. Grove

Mailing Address 171 Main St #278

City Los Altos State CA Zip Code 94022

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

Name of Employer na Occupation homemaker

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
 12 / 23 / 2011
Transaction ID : 3134292

Amount of Each Receipt this Period
 500.00

Susan Bysiewicz Earmarks

Full Name (Last, First, Middle Initial)
C. Ms. Marian Harris

Mailing Address 67-87 Booth St.

City Forest Hills State NY Zip Code 11375

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2011
Transaction ID : 3135452

Amount of Each Receipt this Period
 50.00

Susan Bysiewicz Earmarks

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: | PAGE 987 OF 2452 |
| | (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. Margaret A. Hefner
Full Name (Last, First, Middle Initial)

Mailing Address 715 N Price Rd

City Olivette State MO Zip Code 63132

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

Name of Employer Saint Louis University Occupation Genetic Counselor

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
 12 / 24 / 2011

Transaction ID : 3135475

Amount of Each Receipt this Period
 100.00

Susan Bysiewicz Earmarks

B. Mr. Gregory Durniak
Full Name (Last, First, Middle Initial)

Mailing Address 46-16 215th place 2D

City Bayside State NY Zip Code 11361

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

Name of Employer self Occupation developer

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
 12 / 07 / 2011

Transaction ID : 3123758

Amount of Each Receipt this Period
 50.00

Susan Bysiewicz Earmarks

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

Mailing Address 1 Charcoal Hill Common

City Westport State CT Zip Code 06880

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

Name of Employer Self Occupation Attorney

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
 12 / 13 / 2011

Transaction ID : 3126671

Amount of Each Receipt this Period
 1000.00

Susan Bysiewicz Earmarks

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1150.00 |
| 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 988 OF 2452 |
| | <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 Bashore
Full Name (Last, First, Middle Initial)

Mailing Address 31 Allen RD

City Ephrata State PA Zip Code 17522

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011

Transaction ID : 3120171

Amount of Each Receipt this Period
 5.00

Tammy Baldwin Earmarks

B. Mr. James Crawford
Full Name (Last, First, Middle Initial)

Mailing Address 5760 Citrus Ave

City Whittier State CA Zip Code 90601

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011

Transaction ID : 3120177

Amount of Each Receipt this Period
 20.00

Tammy Baldwin Earmarks

C. Ms. Phyllis Gardner
Full Name (Last, First, Middle Initial)

Mailing Address 406 Tennessee Glen Way

City Mill Valley State CA Zip Code 94941

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2011

Transaction ID : 3120252

Amount of Each Receipt this Period
 10.00

Tammy Baldwin Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 35.00

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 989 OF 2452 |
| | <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. Joan Hubbell
Full Name (Last, First, Middle Initial)

Mailing Address 509 Aurora Ave Unit 420

City Naperville State IL Zip Code 60540

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : 3123078

Amount of Each Receipt this Period
 20.00

Tammy Baldwin Earmarks

B. Ms. Mary Lyons
Full Name (Last, First, Middle Initial)

Mailing Address 36 Barkley Cir.

City Fort Myers State FL Zip Code 33907

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : 3123095

Amount of Each Receipt this Period
 20.00

Tammy Baldwin Earmarks

C. Ms. Joyce O. Newcomb
Full Name (Last, First, Middle Initial)

Mailing Address 5355 Pooks Hill Rd.

City Bethesda State MD Zip Code 20814

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123420

Amount of Each Receipt this Period
 20.00

Tammy Baldwin Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 60.00 |
| 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 990 OF 2452 |
| | <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. Cynthia Pedlikin
Full Name (Last, First, Middle Initial)

Mailing Address 118 Hussey RD

City Peaks Island State ME Zip Code 04108

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123481

Amount of Each Receipt this Period
 12.50

Tammy Baldwin Earmarks

B. Ms. Susan P. Nye
Full Name (Last, First, Middle Initial)

Mailing Address 671 Roxborough Avenue

City Philadelphia State PA Zip Code 19128

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123489

Amount of Each Receipt this Period
 8.35

Tammy Baldwin Earmarks

C. Mrs. Ruth Giese
Full Name (Last, First, Middle Initial)

Mailing Address 12 Asbury Avenue

City Binghamton State NY Zip Code 13901

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011

Transaction ID : 3125000

Amount of Each Receipt this Period
 25.00

Tammy Baldwin Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 45.85 |
| TOTAL This Period (last page this line 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 991 OF 2452 |
| | <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 Jefferson
Full Name (Last, First, Middle Initial)
Mailing Address 5235 E Fern Haven Ln.
City Anaheim State CA Zip Code 92807
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 **0.00**

Date of Receipt **12 / 08 / 2011**
Transaction ID : 3125012
Amount of Each Receipt this Period **20.00**
Tammy Baldwin Earmarks

B. Ms. Donna E. Willoughby
Full Name (Last, First, Middle Initial)
Mailing Address 22 Lake Creek Rd.
City Salmon State ID Zip Code 83467
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 **0.00**

Date of Receipt **12 / 08 / 2011**
Transaction ID : 3125043
Amount of Each Receipt this Period **50.00**
Tammy Baldwin Earmarks

C. Ms. Christina D. Baker
Full Name (Last, First, Middle Initial)
Mailing Address 1150 Willow Glen Way
City San Jose State CA Zip Code 95125
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 **0.00**

Date of Receipt **12 / 08 / 2011**
Transaction ID : 3125055
Amount of Each Receipt this Period **50.00**
Tammy Baldwin Earmarks

SUBTOTAL of Receipts This Page (optional)..... **120.00**
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 992 OF 2452 |
| | <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. Gail Silverstone
Full Name (Last, First, Middle Initial)

Mailing Address 6633 32 Place, NW
32nd Place, NW

City Washington, State DC Zip Code 20015

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 ▼
0.00

Date of Receipt
12 / 09 / 2011
Transaction ID : 3126620

Amount of Each Receipt this Period
33.33

Tammy Baldwin Earmarks

B. Ms. B. Kay Kinnear
Full Name (Last, First, Middle Initial)

Mailing Address 621B Idlewild Circle

City Birmingham State AL Zip Code 35205

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 ▼
0.00

Date of Receipt
12 / 12 / 2011
Transaction ID : 3126831

Amount of Each Receipt this Period
100.00

Tammy Baldwin Earmarks

C. Ms. Grace Winchell
Full Name (Last, First, Middle Initial)

Mailing Address 6411 Weber Circle

City Huntington Beach State CA Zip Code 92647

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 ▼
0.00

Date of Receipt
12 / 12 / 2011
Transaction ID : 3127079

Amount of Each Receipt this Period
50.00

Tammy Baldwin Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 183.33

TOTAL This Period (last page this line 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 993 OF 2452 |
| | <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. Emily Rauh Pulitzer
Full Name (Last, First, Middle Initial)
Mailing Address 4903 Pershing Pl.
City Saint Louis State MO Zip Code 63108
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 ▼ 0.00

Date of Receipt 12 / 12 / 2011
Transaction ID : 3127084
Amount of Each Receipt this Period 250.00
Tammy Baldwin Earmarks

B. Mr. David P. Brickley
Full Name (Last, First, Middle Initial)
Mailing Address 71 Throckmorton Ave
City West Long Branch State NJ Zip Code 07764
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 ▼ 0.00

Date of Receipt 12 / 12 / 2011
Transaction ID : 3127094
Amount of Each Receipt this Period 25.00
Tammy Baldwin Earmarks

C. Rosemarie Sheperd
Full Name (Last, First, Middle Initial)
Mailing Address 2 West 3rd Ave.
City Johnstown State NY Zip Code 12095
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 ▼ 0.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129885
Amount of Each Receipt this Period 50.00
Tammy Baldwin Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 325.00
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 994 OF 2452
(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. Mrs. Peg French

Mailing Address 544 Kemmerer Road

City State Zip Code
State College PA 16801

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 ▼
0.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129901

Amount of Each Receipt this Period
25.00

Tammy Baldwin Earmarks

Full Name (Last, First, Middle Initial)
B. Mrs. Gloria M. Gray

Mailing Address 436 Crestover Circle

City State Zip Code
Richardson TX 75080

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 ▼
0.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129913

Amount of Each Receipt this Period
20.00

Tammy Baldwin Earmarks

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

Mailing Address 150 McKnight Drive

City State Zip Code
Laguna Beach CA 92651

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 ▼
0.00

Date of Receipt
12 / 16 / 2011
Transaction ID : 3131722

Amount of Each Receipt this Period
100.00

Tammy Baldwin Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00

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 995 OF 2452 |
| | <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. Sydney Story
 Full Name (Last, First, Middle Initial)
 Mailing Address 205 E Terrace Ave
 City Fresno State CA Zip Code 93704
 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 ▼ 0.00

Date of Receipt
 12 / 19 / 2011
Transaction ID : 3131745
 Amount of Each Receipt this Period
 10.00
 Tammy Baldwin Earmarks

B. Mr. Fred Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 Holmes Ranch Rd PO Box 328
 City Philo State CA Zip Code 95466
 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 ▼ 0.00

Date of Receipt
 12 / 19 / 2011
Transaction ID : 3131790
 Amount of Each Receipt this Period
 20.00
 Tammy Baldwin Earmarks

C. Mr. Bernard Shyffer
 Full Name (Last, First, Middle Initial)
 Mailing Address 4212 Palos Verdes Drive E
 City Rancho Pls. Vrd. State CA Zip Code 90275
 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 ▼ 0.00

Date of Receipt
 12 / 20 / 2011
Transaction ID : 3132540
 Amount of Each Receipt this Period
 100.00
 Tammy Baldwin Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 130.00 |
| 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 996 OF 2452 |
| | <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. Elizabeth Lee Williams
Full Name (Last, First, Middle Initial)

Mailing Address 28 Olmstead Green Court

| | | |
|-------------------|-------------|-------------------|
| City Baltimore | State MD | Zip Code 21210 |
|-------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 21 | / | 2011 |

Transaction ID : 3133748

Amount of Each Receipt this Period

| |
|-------|
| 30.00 |
|-------|

 Tammy Baldwin Earmarks

B. Mr. Merle D. Borchers
Full Name (Last, First, Middle Initial)

Mailing Address 2346 78th Street E

| | | |
|---------------------|-------------|-------------------|
| City Inver Grove | State MN | Zip Code 55076 |
|---------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3139533

Amount of Each Receipt this Period

| |
|------|
| 6.67 |
|------|

 Tammy Baldwin Earmarks

C. Ms. Kathryn M. Macchi
Full Name (Last, First, Middle Initial)

Mailing Address 1003 E 44th Street

| | | |
|----------------|-------------|-------------------|
| City Austin | State TX | Zip Code 78751 |
|----------------|-------------|-------------------|

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

| | |
|------------------------|--------------------------------|
| Name of Employer 3M | Occupation Computer Support |
|------------------------|--------------------------------|

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 |
| 12 | / | 05 | / | 2011 |

Transaction ID : 3123085

Amount of Each Receipt this Period

| |
|-------|
| 10.00 |
|-------|

 Tammy Baldwin Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 46.67 |
| TOTAL This Period (last page this line 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 997 OF 2452 |
| | <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. Karen Rothblatt
Full Name (Last, First, Middle Initial)
Mailing Address 1337 Derby St
City Berkeley State CA Zip Code 94702
FEC ID number of contributing federal political committee. **C**
Name of Employer Alameda Hospital Occupation RN
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 27 / 2011**
Transaction ID : 3139510
Amount of Each Receipt this Period **8.34**
Tammy Baldwin Earmarks

B. Lois Schwartz
Full Name (Last, First, Middle Initial)
Mailing Address 7275B St
City South Haven State MI Zip Code 49090
FEC ID number of contributing federal political committee. **C**
Name of Employer DePaul University Occupation adjunct instructor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 01 / 2011**
Transaction ID : 3120193
Amount of Each Receipt this Period **10.00**
Tammy Baldwin Earmarks

C. Ms. Judi Fishman
Full Name (Last, First, Middle Initial)
Mailing Address 923 W Webster Ave
City Chicago State IL Zip Code 60614
FEC ID number of contributing federal political committee. **C**
Name of Employer Federal Street Holdings Occupation REAL ESTATE EXEC
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 27 / 2011**
Transaction ID : 3139526
Amount of Each Receipt this Period **25.00**
Tammy Baldwin Earmarks

SUBTOTAL of Receipts This Page (optional)..... **43.34**
TOTAL This Period (last page this line 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 998 OF 2452 |
| | <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. Gerrie Barclay
Full Name (Last, First, Middle Initial)

Mailing Address 32241 Southfield Road

City Birmingham State MI Zip Code 48025

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

Name of Employer Fitz Public Schls Occupation Bilingual Coordinator

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
 12 / 01 / 2011

Transaction ID : 3120210

Amount of Each Receipt this Period
 50.00

Tammy Baldwin Earmarks

B. Mrs. Marianita Meyer
Full Name (Last, First, Middle Initial)

Mailing Address 425 Park Ave. South Apt. 18C

City New York State NY Zip Code 10016

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

Name of Employer Kreindler & Kreindler Occupation Legal Assistant

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
 12 / 27 / 2011

Transaction ID : 3139506

Amount of Each Receipt this Period
 33.33

Tammy Baldwin Earmarks

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

Mailing Address 50 Vista Verde Way

City Edgewood State NM Zip Code 87015

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

Name of Employer Lovelace Resp. Res. Inst. Occupation Veterinarian

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
 12 / 08 / 2011

Transaction ID : 3125025

Amount of Each Receipt this Period
 50.00

Tammy Baldwin Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 133.33

TOTAL This Period (last page this line 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 999 OF 2452 |
| | <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. Sergei Kouznetsov
Full Name (Last, First, Middle Initial)

Mailing Address 6757 Vermar Ter

City Eden Prairie State MN Zip Code 55346

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

Name of Employer maverick tech Occupation engineer

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
 12 / 02 / 2011

Transaction ID : 3120277

Amount of Each Receipt this Period
 10.00

Tammy Baldwin Earmarks

B. Ms. Alice A. Kleinhans
Full Name (Last, First, Middle Initial)

Mailing Address 45 North St.

City Andover State MA Zip Code 01810

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

Name of Employer Merrimack Valley Occupation Lawyer

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
 12 / 05 / 2011

Transaction ID : 3122989

Amount of Each Receipt this Period
 100.00

Tammy Baldwin Earmarks

C. Ms. Leslie H. Pierpont
Full Name (Last, First, Middle Initial)

Mailing Address 4157 ortega blvd

City Jacksonville State FL Zip Code 32210

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

Name of Employer Native and Uncommon Plants Occupation Requested

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
 12 / 14 / 2011

Transaction ID : 3127256

Amount of Each Receipt this Period
 10.00

Tammy Baldwin Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 120.00 |
| 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 1000 OF 2452 |
| | <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. Frances Y. Smith
Full Name (Last, First, Middle Initial)

Mailing Address 30667 Mystic Forest Drive

City Farmington Hill State MI Zip Code 48331

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

Name of Employer Oakland Comm. College Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
12 / 08 / 2011
Transaction ID : 3125006

Amount of Each Receipt this Period
16.70

Tammy Baldwin Earmarks

B. Ms. Ruth Fredericks
Full Name (Last, First, Middle Initial)

Mailing Address 3 Peter Cooper Rd Apt. 14E

City New York State NY Zip Code 10010

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 ▼ 0.00

Date of Receipt
12 / 01 / 2011
Transaction ID : 3120066

Amount of Each Receipt this Period
10.00

Tammy Baldwin Earmarks

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

Mailing Address 101 W. 147th Street # 21E

City New York State NY Zip Code 10039

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 ▼ 0.00

Date of Receipt
12 / 01 / 2011
Transaction ID : 3120185

Amount of Each Receipt this Period
20.00

Tammy Baldwin Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 46.70 |
| TOTAL This Period (last page this line 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 1001 OF 2452 |
| | <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. Susan Oleshko
 Full Name (Last, First, Middle Initial)
 Mailing Address 287 W 5th St.
 City State Zip Code
 Deer Park NY 11729
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3120195
 Amount of Each Receipt this Period
 25.00
 Tammy Baldwin Earmarks

B. Ms. Joslen Letscher
 Full Name (Last, First, Middle Initial)
 Mailing Address 41120 Fox Run, Apt. T19
 City State Zip Code
 Novi MI 48377
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3120201
 Amount of Each Receipt this Period
 25.00
 Tammy Baldwin Earmarks

C. R Masty
 Full Name (Last, First, Middle Initial)
 Mailing Address 975 Holly St.
 City State Zip Code
 Bullhead City AZ 86442
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3120207
 Amount of Each Receipt this Period
 10.00
 Tammy Baldwin Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 60.00 |
| 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 1002 OF 2452 |
| | <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

| | | |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Mr. Peter Lemkin | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2011 Transaction ID : 3120216 |
| Mailing Address 14825 Keeneland Circle | | Amount of Each Receipt this Period 0.00 Tammy Baldwin Earmarks |
| City North Potomac | State MD | Zip Code 20878 |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Mr. William Kornfeld | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 02 / 2011 Transaction ID : 3120234 |
| Mailing Address 1304 Bobbi Ct. | | Amount of Each Receipt this Period 33.33 Tammy Baldwin Earmarks |
| City Bowling Green | State KY | Zip Code 42103 |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Carlyn Halde | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 02 / 2011 Transaction ID : 3120240 |
| Mailing Address 63 Park Hill Ave. | | Amount of Each Receipt this Period 50.00 Tammy Baldwin Earmarks |
| City San Francisco | State CA | Zip Code 94117 |
| 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 ▼ 0.00 | |

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 88.33 |
| TOTAL This Period (last page this line 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 1003 OF 2452 |
| | <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. N. Laura Middleton M.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 Windridge Rd.
 City Essex Junction State VT Zip Code 05452
 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 ▼ 0.00

Date of Receipt
 12 / 02 / 2011
Transaction ID : 3120246
 Amount of Each Receipt this Period
 83.35
 Tammy Baldwin Earmarks

B. Mr. Ken Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 965 Kelly Blvd
 City Springfield State OR Zip Code 97477
 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 ▼ 0.00

Date of Receipt
 12 / 02 / 2011
Transaction ID : 3120258
 Amount of Each Receipt this Period
 10.00
 Tammy Baldwin Earmarks

C. Ms. Shirley Bales
 Full Name (Last, First, Middle Initial)
 Mailing Address 1525 Althea Dr
 City Houston State TX Zip Code 77018
 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 ▼ 0.00

Date of Receipt
 12 / 02 / 2011
Transaction ID : 3120265
 Amount of Each Receipt this Period
 20.00
 Tammy Baldwin Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 113.35 |
| TOTAL This Period (last page this line 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 1004 OF 2452 |
| | <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. Isabel Labriola
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 10794

| | | |
|---|----------------------------------|-------------------|
| City Zephyr Cove | State NV | Zip Code 89448 |
| 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 ▼ 0.00 | |

Date of Receipt
12 / 02 / 2011
Transaction ID : 3120267

Amount of Each Receipt this Period
20.00

Tammy Baldwin Earmarks

B. Ms. Elizabeth Aberdale
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1417

| | | |
|---|----------------------------------|-------------------|
| City Wellfleet | State MA | Zip Code 02667 |
| 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 ▼ 0.00 | |

Date of Receipt
12 / 02 / 2011
Transaction ID : 3120283

Amount of Each Receipt this Period
30.00

Tammy Baldwin Earmarks

C. Ms. Anna Vanfrachen
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 68732

| | | |
|---|----------------------------------|-------------------|
| City Seattle | State WA | Zip Code 98168 |
| 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 ▼ 0.00 | |

Date of Receipt
12 / 02 / 2011
Transaction ID : 3120286

Amount of Each Receipt this Period
5.00

Tammy Baldwin Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 55.00 |
| 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 1005 OF 2452 |
| | <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

| | | |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Ms. Harriette C. Buchanan | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3122995 |
| Mailing Address 194 Eastview Dr. | | Amount of Each Receipt this Period 20.00 Tammy Baldwin Earmarks |
| City Boone | State NC | Zip Code 28607 |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Judith Wilcox | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123001 |
| Mailing Address 26988 Heatherford Dr., Apt. 3 | | Amount of Each Receipt this Period 6.66 Tammy Baldwin Earmarks |
| City Perrysburg | State OH | Zip Code 43551 |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Patricia S. Byard | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123007 |
| Mailing Address 3615 Maidu Pl. | | Amount of Each Receipt this Period 100.00 Tammy Baldwin Earmarks |
| City Davis | State CA | Zip Code 95618 |
| 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 ▼ 0.00 | |

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| SUBTOTAL of Receipts This Page (optional).....▶ | 126.66 |
| 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: | PAGE 1006 OF 2452 |
| | (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. Muriel I. Patterson
Full Name (Last, First, Middle Initial)

Mailing Address 900 Hill Street

City Broomfield State CO Zip Code 80023

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : 3123013

Amount of Each Receipt this Period
 10.00

Tammy Baldwin Earmarks

B. Mr. Michael Burt
Full Name (Last, First, Middle Initial)

Mailing Address 505 13th St. SE, Apt. 1

City Washington State DC Zip Code 20003

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : 3123019

Amount of Each Receipt this Period
 100.00

Tammy Baldwin Earmarks

C. M. J. McAdam
Full Name (Last, First, Middle Initial)

Mailing Address 710 Bird Bay Dr W

City Venice State FL Zip Code 34285

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2011

Transaction ID : 3123025

Amount of Each Receipt this Period
 20.00

Tammy Baldwin Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00

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 1007 OF 2452 |
| | <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. Barbara House | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2011 Transaction ID : 3123037 |
| Mailing Address 699 Lost River Road | | Amount of Each Receipt this Period 20.00 Tammy Baldwin Earmarks |
| City Mazama State WA Zip Code 98833 | FEC ID number of contributing federal political committee. C | |
| Name of Employer REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Ms. Ruth Mayerson | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2011 Transaction ID : 3123043 |
| Mailing Address 5021 Noeline Avenue | | Amount of Each Receipt this Period 25.00 Tammy Baldwin Earmarks |
| City Encino State CA Zip Code 91436 | FEC ID number of contributing federal political committee. C | |
| Name of Employer REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Ms. Markate Daly | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2011 Transaction ID : 3123045 |
| Mailing Address 2730 Parker St. | | Amount of Each Receipt this Period 50.00 Tammy Baldwin Earmarks |
| City Berkeley State CA Zip Code 94704 | FEC ID number of contributing federal political committee. C | |
| Name of Employer REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation REQUESTED Aggregate Year-to-Date ▼ 0.00 | |

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 95.00 |
| TOTAL This Period (last page this line number only)..... | 95.00 |

**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 1008 OF 2452 |
| | <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. Yvette L. Gunn | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123047 |
| Mailing Address 2328 Oakview Rd NE | | Amount of Each Receipt this Period 10.00 Tammy Baldwin Earmarks |
| City Atlanta | State GA | Zip Code 30317 |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial) B. John W. Bakhuls | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123056 |
| Mailing Address 6 Scottsdale Way # 1 | | Amount of Each Receipt this Period 10.00 Tammy Baldwin Earmarks |
| City Novato | State CA | Zip Code 94947 |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Eva Kelley | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123062 |
| Mailing Address 760 N 2nd St., Apt. 18 | | Amount of Each Receipt this Period 2.00 Tammy Baldwin Earmarks |
| City Paragould | State AR | Zip Code 72450 |
| 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 ▼ 0.00 | |

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 22.00 |
| 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 1009 OF 2452 |
| | (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. Mr. William Guthrie
Full Name (Last, First, Middle Initial)
Mailing Address 301 Aden Ct.
City Upper Marlboro State MD Zip Code 20774
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 ▼ 0.00

Date of Receipt 12 / 05 / 2011
Transaction ID : 3123068
Amount of Each Receipt this Period 4.16
Tammy Baldwin Earmarks

B. Ms. Pat Sibley
Full Name (Last, First, Middle Initial)
Mailing Address 118 SW 116th Street Apt. D24
City Seattle State WA Zip Code 98146
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 ▼ 0.00

Date of Receipt 12 / 05 / 2011
Transaction ID : 3123089
Amount of Each Receipt this Period 2.00
Tammy Baldwin Earmarks

C. Ms. Dolores McCullough
Full Name (Last, First, Middle Initial)
Mailing Address 21415 33rd Ave.
City Bayside State NY Zip Code 11361
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 ▼ 0.00

Date of Receipt 12 / 06 / 2011
Transaction ID : 3123131
Amount of Each Receipt this Period 25.00
Tammy Baldwin Earmarks

SUBTOTAL of Receipts This Page (optional).....▶ 31.16
TOTAL This Period (last page this line 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 1010 OF 2452 |
| <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

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Carol Detweiler | | Date of Receipt 12 / 06 / 2011 Transaction ID : 3123141 |
| Mailing Address 1704 Shadford Rd. | | Amount of Each Receipt this Period 50.00 |
| City Ann Arbor | State MI | Zip Code 48104 |
| FEC ID number of contributing federal political committee. C | | Tammy Baldwin Earmarks |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr. Curtis J. Eaton | | Date of Receipt 12 / 06 / 2011 Transaction ID : 3123149 |
| Mailing Address 622 Hall Blvd | | Amount of Each Receipt this Period 20.00 |
| City Mason | State MI | Zip Code 48854 |
| FEC ID number of contributing federal political committee. C | | Tammy Baldwin Earmarks |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Mr. Rowland Bell | | Date of Receipt 12 / 07 / 2011 Transaction ID : 3123414 |
| Mailing Address 606 Fords Landing Way | | Amount of Each Receipt this Period 200.00 |
| City Alexandria | State VA | Zip Code 22314 |
| FEC ID number of contributing federal political committee. C | | Tammy Baldwin Earmarks |
| 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 ▼ 0.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 270.00 |
| 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 1011 OF 2452 |
| | <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 | |

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. Katherine Horowitz | | Date of Receipt 12 / 07 / 2011 Transaction ID : 3123426 |
| Mailing Address 2173 Glenkirk Drive | | Amount of Each Receipt this Period 20.00 Tammy Baldwin Earmarks |
| City San Jose | State CA | Zip Code 95124 |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Mr. Americo Garza | | Date of Receipt 12 / 07 / 2011 Transaction ID : 3123432 |
| Mailing Address 8815 Tweedy Lane | | Amount of Each Receipt this Period 10.00 Tammy Baldwin Earmarks |
| City Downey | State CA | Zip Code 90240 |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Minette Hoffheimer | | Date of Receipt 12 / 07 / 2011 Transaction ID : 3123455 |
| Mailing Address 1201 Edgecliff Pl., Apt. 1021 Apt. 1021 | | Amount of Each Receipt this Period 100.00 Tammy Baldwin Earmarks |
| City Cincinnati | State OH | Zip Code 45206 |
| 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 ▼ 0.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 130.00 |
| 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 1012 OF 2452 |
| | <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. Betty Armstrong
 Full Name (Last, First, Middle Initial)
 Mailing Address 16221 SE 29th St
 City Bellevue State WA Zip Code 98008
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : 3123457
 Amount of Each Receipt this Period
 16.70
 Tammy Baldwin Earmarks

B. Robert E. Laveine
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 412
 City West Burlington State IA Zip Code 52655
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : 3123467
 Amount of Each Receipt this Period
 100.00
 Tammy Baldwin Earmarks

C. Joyce Goodman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1140 5th Avenue
 City New York State NY Zip Code 10128
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : 3123473
 Amount of Each Receipt this Period
 100.00
 Tammy Baldwin Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 216.70 |
| TOTAL This Period (last page this line 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 1013 OF 2452 |
| | <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. Charlotte Pera | | Date of Receipt 12 / 07 / 2011 Transaction ID : 3123479 |
| Mailing Address 437 Jeter St | | Amount of Each Receipt this Period 50.00 Tammy Baldwin Earmarks |
| City Redwood City | State CA | Zip Code 94062 |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Mr. Donald J. Sutherland | | Date of Receipt 12 / 08 / 2011 Transaction ID : 3125019 |
| Mailing Address 2221 Ocean Ave., Apt. 108 | | Amount of Each Receipt this Period 20.00 Tammy Baldwin Earmarks |
| City Santa Monica | State CA | Zip Code 90405 |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Elsie Murray | | Date of Receipt 12 / 08 / 2011 Transaction ID : 3125029 |
| Mailing Address 1429 Beulah Rd | | Amount of Each Receipt this Period 25.00 Tammy Baldwin Earmarks |
| City Pittsburgh | State PA | Zip Code 15235 |
| 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 ▼ 0.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 95.00 |
| 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 1014 OF 2452 |
| | <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. Eileen Coblens
 Full Name (Last, First, Middle Initial)
 Mailing Address 91 Lancia Drive
 City East Norwich State NY Zip Code 11732
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125035
 Amount of Each Receipt this Period
 15.00
 Tammy Baldwin Earmarks

B. Ms. Sandra Carr
 Full Name (Last, First, Middle Initial)
 Mailing Address 2742 Bennett Ridge Rd.
 City Santa Rosa State CA Zip Code 95404
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125039
 Amount of Each Receipt this Period
 25.00
 Tammy Baldwin Earmarks

C. Catheine O'Connor
 Full Name (Last, First, Middle Initial)
 Mailing Address 429 Josiah Bartlett Rd.
 City Concord State NH Zip Code 03301
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125049
 Amount of Each Receipt this Period
 3.35
 Tammy Baldwin Earmarks

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 43.35 |
| TOTAL This Period (last page this line 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 1015 OF 2452 |
| | <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. Carl Duzen
Full Name (Last, First, Middle Initial)
Mailing Address 520 Kathmere Road
City Havertown State PA Zip Code 19083
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 ▼ 0.00

Date of Receipt 12 / 08 / 2011
Transaction ID : 3125067
Amount of Each Receipt this Period 50.00
Tammy Baldwin Earmarks

B. Richard Bloss
Full Name (Last, First, Middle Initial)
Mailing Address 2323 Simpson St.
City Evanston State IL Zip Code 60201
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 ▼ 0.00

Date of Receipt 12 / 09 / 2011
Transaction ID : 3126557
Amount of Each Receipt this Period 2.50
Tammy Baldwin Earmarks

C. Ms. Joan Kowalski
Full Name (Last, First, Middle Initial)
Mailing Address 54275 Bradshaw DR
City New Baltimore State MI Zip Code 48047
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 ▼ 0.00

Date of Receipt 12 / 09 / 2011
Transaction ID : 3126564
Amount of Each Receipt this Period 8.33
Tammy Baldwin Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.83
TOTAL This Period (last page this line 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 1016 OF 2452 |
| | <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. Carole C. Allen
Full Name (Last, First, Middle Initial)
Mailing Address 180 Montana Drive

| | | |
|------------------|-------------|-------------------|
| City Danville | State CA | Zip Code 94526 |
|------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 09 | | 2011 |

Transaction ID : 3126570

Amount of Each Receipt this Period

| | | |
|--------|----|------|
| 12 | 09 | 2011 |
| 112.50 | | |

 Tammy Baldwin Earmarks

B. Ms. Betty S. Tunstall
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1091

| | | |
|---------------------------|-------------|-------------------|
| City Black Canyon City | State AZ | Zip Code 85324 |
|---------------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 09 | | 2011 |

Transaction ID : 3126589

Amount of Each Receipt this Period

| | | |
|--------|----|------|
| 12 | 09 | 2011 |
| 100.00 | | |

 Tammy Baldwin Earmarks

C. Mr. John R. Brady
Full Name (Last, First, Middle Initial)
Mailing Address 2609 Waverly Dr.

| | | |
|---------------------|-------------|-------------------|
| City Los Angeles | State CA | Zip Code 90039 |
|---------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 09 | | 2011 |

Transaction ID : 3126603

Amount of Each Receipt this Period

| | | |
|--------|----|------|
| 12 | 09 | 2011 |
| 100.00 | | |

 Tammy Baldwin Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 112.50 |
| TOTAL This Period (last page this line 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 1017 OF 2452
(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. Nancy J. Doolittle

Mailing Address 572 Spencer Road

City State Zip Code
Candor NY 13743

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3126605

Amount of Each Receipt this Period
 20.00

Tammy Baldwin Earmarks

Full Name (Last, First, Middle Initial)
B. Ms. Laura Steele

Mailing Address 10509 Hutting Pl.

City State Zip Code
Silver Spring MD 20902

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3126608

Amount of Each Receipt this Period
 20.00

Tammy Baldwin Earmarks

Full Name (Last, First, Middle Initial)
C. Ms. Dorothea R. Crisp

Mailing Address 1245 SW Walking Wood

City State Zip Code
Depoe Bay OR 97341

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3126614

Amount of Each Receipt this Period
 20.00

Tammy Baldwin Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

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 1018 OF 2452 |
| | (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. Neva Wall
Full Name (Last, First, Middle Initial)
Mailing Address 150 Ashton Dr.
City Athens State GA Zip Code 30606
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 ▼ 0.00

Date of Receipt 12 / 12 / 2011
Transaction ID : 3127074
Amount of Each Receipt this Period 25.00
Tammy Baldwin Earmarks

B. Bernardo Hollman
Full Name (Last, First, Middle Initial)
Mailing Address 10237 Autumnview Ln
City San Diego State CA Zip Code 92126
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 ▼ 0.00

Date of Receipt 12 / 12 / 2011
Transaction ID : 3127086
Amount of Each Receipt this Period 2.00
Tammy Baldwin Earmarks

C. Ms. Susan Dennehy
Full Name (Last, First, Middle Initial)
Mailing Address 240 Central Park S.
City New York State NY Zip Code 10019
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 ▼ 0.00

Date of Receipt 12 / 12 / 2011
Transaction ID : 3127098
Amount of Each Receipt this Period 12.50
Tammy Baldwin Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 39.50
TOTAL This Period (last page this line 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 1019 OF 2452 |
| | <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. Mr. Peter Henning
 Full Name (Last, First, Middle Initial)
 Mailing Address 8485 Hunts Point Ln
 City Hunts Point State WA Zip Code 98004
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011
Transaction ID : 3127133
 Amount of Each Receipt this Period
 10.00
 Tammy Baldwin Earmarks

B. Ms. Carolyn Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 7409 Flower Ave.
 City Takoma Park State MD Zip Code 20912
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3127267
 Amount of Each Receipt this Period
 25.00
 Tammy Baldwin Earmarks

C. Ms. Carol Cooper
 Full Name (Last, First, Middle Initial)
 Mailing Address 58 Grandview Ave.
 City Kingston State NY Zip Code 12401
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129891
 Amount of Each Receipt this Period
 10.00
 Tammy Baldwin Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 45.00 |
| 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 1020 OF 2452 |
| | <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. Nancy Richards
 Full Name (Last, First, Middle Initial)
 Mailing Address 5207 Church Drive
 City Charleston State WV Zip Code 25306
 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 **0.00**

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3129905
 Amount of Each Receipt this Period
20.00
 Tammy Baldwin Earmarks

B. Ms. Margaret C. Bam
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 Greens Way
 City New Rochelle State NY Zip Code 10805
 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 **0.00**

Date of Receipt
 12 / 15 / 2011
Transaction ID : 3129911
 Amount of Each Receipt this Period
50.00
 Tammy Baldwin Earmarks

C. Ms. Barbara Carr
 Full Name (Last, First, Middle Initial)
 Mailing Address 3266 Chamberlain Cir.
 City Ann Arbor State MI Zip Code 48103
 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 **0.00**

Date of Receipt
 12 / 16 / 2011
Transaction ID : 3131719
 Amount of Each Receipt this Period
100.00
 Tammy Baldwin Earmarks

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 170.00 |
| 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 1021 OF 2452 |
| | (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

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Ms. Charlotte Alexandre | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 10345 Adams Pl | | Transaction ID : 3131726 |
| City Thornton | State CO | Zip Code 80229 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 0.00 |
| Name of Employer REQUESTED | Occupation REQUESTED | Tammy Baldwin Earmarks |
| 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. Mr. Frederick Phillips | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 1939 Jefferson St., Apt. 101 | | Transaction ID : 3131738 |
| City Hollywood | State FL | Zip Code 33020 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 2.50 |
| Name of Employer REQUESTED | Occupation REQUESTED | Tammy Baldwin Earmarks |
| 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. Mithlesh Prakash | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 19 / 2011 |
| Mailing Address 2665 Condor Cir | | Transaction ID : 3131753 |
| City Corona | State CA | Zip Code 92882 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 33.00 |
| Name of Employer REQUESTED | Occupation REQUESTED | Tammy Baldwin Earmarks |
| 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).....▶ | 45.50 |
| TOTAL This Period (last page this line 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 1022 OF 2452
(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. Barry S. Weyburn
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 388
 City State Zip Code
 Rock Hall MD 21661
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131761
 Amount of Each Receipt this Period
 50.00
 Tammy Baldwin Earmarks

B. Ms. Louise Weschler
 Full Name (Last, First, Middle Initial)
 Mailing Address 161 Richdale Rd
 City State Zip Code
 Colts Neck NJ 07722
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131778
 Amount of Each Receipt this Period
 25.00
 Tammy Baldwin Earmarks

C. Ms. Ellen M. Tirone
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 Edendale Ln
 City State Zip Code
 Durham NH 03824
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131784
 Amount of Each Receipt this Period
 10.00
 Tammy Baldwin Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
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 1023 OF 2452 |
| | <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

| | | |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Carl Weinberg | | Date of Receipt 12 / 20 / 2011 Transaction ID : 3132551 |
| Mailing Address 42 Green Oaks Ct. | | Amount of Each Receipt this Period 20.00 Tammy Baldwin Earmarks |
| City Walnut Creek | State CA | Zip Code 94596 |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Judy Hunter | | Date of Receipt 12 / 20 / 2011 Transaction ID : 3132552 |
| Mailing Address 3586 Indigo Pond Dr | | Amount of Each Receipt this Period 1.66 Tammy Baldwin Earmarks |
| City Palm Harbor | State FL | Zip Code 34685 |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Clair A. Sharpless | | Date of Receipt 12 / 20 / 2011 Transaction ID : 3132578 |
| Mailing Address 1 Drumlin Rd. | | Amount of Each Receipt this Period 100.00 Tammy Baldwin Earmarks |
| City West Simsbury | State CT | Zip Code 6092 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer REQUESTED | Occupation Homemaker | |
| 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).....▶ | 121.66 |
| 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 1024 OF 2452 |
| | <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. Nancy Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 245 N Vine St Apt 903
 City Salt Lake City State UT Zip Code 84103
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011
Transaction ID : 3133749
 Amount of Each Receipt this Period
 10.00
 Tammy Baldwin Earmarks

B. Mary Kazmierski
 Full Name (Last, First, Middle Initial)
 Mailing Address 5293 Snow Mass Trl.
 City Harbor Springs State MI Zip Code 49740
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : 3133760
 Amount of Each Receipt this Period
 20.00
 Tammy Baldwin Earmarks

C. Mary Kazmierski
 Full Name (Last, First, Middle Initial)
 Mailing Address 5293 Snow Mass Trl.
 City Harbor Springs State MI Zip Code 49740
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : 3133761
 Amount of Each Receipt this Period
 20.00
 Tammy Baldwin Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 50.00 |
| 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 1025 OF 2452 |
| | <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. Eleanor T. Weiss
 Full Name (Last, First, Middle Initial)
 Mailing Address 360 Osgood Road
 City Milford State NH Zip Code 03055
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : 3133762
 Amount of Each Receipt this Period
 30.00
 Tammy Baldwin Earmarks

B. Mrs. Marian Ryan
 Full Name (Last, First, Middle Initial)
 Mailing Address 2460 Linette Ct
 City Yorktown Heights State NY Zip Code 10598
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : 3133770
 Amount of Each Receipt this Period
 20.00
 Tammy Baldwin Earmarks

C. Ms. Natalie Grigg
 Full Name (Last, First, Middle Initial)
 Mailing Address 92 Lakeshore Road
 City Boxford State MA Zip Code 01921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation Housewife/farmer
 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
 12 / 27 / 2011
Transaction ID : 3139496
 Amount of Each Receipt this Period
 100.00
 Tammy Baldwin Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 150.00 |
| 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 1026 OF 2452 |
| | <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

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Ms. Ann French | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address 73 5th Avenue | | Transaction ID : 3139509 |
| City San Francisco | State CA | Zip Code 94118 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50.00 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Tammy Baldwin Earmarks |
| 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. Ms. Patricia Froman | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address 214 Parliament Dr. | | Transaction ID : 3139518 |
| City Coraopolis | State PA | Zip Code 15108 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 20.00 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Tammy Baldwin Earmarks |
| 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. Ms. Mary Niccolls | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 27 / 2011 |
| Mailing Address 1830 Garden Dr. | | Transaction ID : 3139543 |
| City Medford | State OR | Zip Code 97504 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 40.00 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Tammy Baldwin Earmarks |
| 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).....▶ | 110.00 |
| 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 1027 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Katha D. Massey
 Full Name (Last, First, Middle Initial)
 Mailing Address 270 Victoria Street
 City Commerce State GA Zip Code 30529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation Librarian
 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
 12 / 29 / 2011
Transaction ID : 3139560
 Amount of Each Receipt this Period
50.00
 Tammy Baldwin Earmarks

B. Ms. Colleen B. Dipaul
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 95
 City Rector State PA Zip Code 15677
 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 **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : 3139563
 Amount of Each Receipt this Period
15.00
 Tammy Baldwin Earmarks

C. Nessa Peters
 Full Name (Last, First, Middle Initial)
 Mailing Address 1010 cann road
 City silver spring State MD Zip Code 20904
 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 **0.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3127261
 Amount of Each Receipt this Period
20.00
 Tammy Baldwin Earmarks

| | |
|---|--------------|
| SUBTOTAL of Receipts This Page (optional)..... | 85.00 |
| 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 1028 OF 2452 |
| | <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. Marciarose Shestack
 Full Name (Last, First, Middle Initial)
 Mailing Address 2201 Pennsylvania Avenue
 City Philadelphia State PA Zip Code 19130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: retired Occupation: TV anchor journalist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt: 12 / 19 / 2011
Transaction ID : 3131772
 Amount of Each Receipt this Period: 16.66
 Tammy Baldwin Earmarks

B. Ms. Maura H. Albert
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 Wyman Terrace
 City Arlington State MA Zip Code 02474
 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 **0.00**

Date of Receipt: 12 / 27 / 2011
Transaction ID : 3139517
 Amount of Each Receipt this Period: 25.00
 Tammy Baldwin Earmarks

C. Ms. Judith Rogovin
 Full Name (Last, First, Middle Initial)
 Mailing Address 4556 Forest Wood Trl
 City Sarasota State FL Zip Code 34241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Saint Paul Public Schls Occupation: Teacher
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt: 12 / 20 / 2011
Transaction ID : 3132563
 Amount of Each Receipt this Period: 0.83
 Tammy Baldwin Earmarks

| | |
|---|--------------|
| SUBTOTAL of Receipts This Page (optional)..... | 42.49 |
| TOTAL This Period (last page this line 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 1029 OF 2452 |
| | <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. Mr. Andrew Carson
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 709
 City State Zip Code
 Wilson WY 83014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 self mtn guide
 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
 12 / 01 / 2011
Transaction ID : 3120163
 Amount of Each Receipt this Period
 10.00
 Tammy Baldwin Earmarks

B. Mr. Phillip S. Berry
 Full Name (Last, First, Middle Initial)
 Mailing Address 4510 Canyon Road
 City State Zip Code
 Lafayette CA 94549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Lawyer
 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
 12 / 05 / 2011
Transaction ID : 3123033
 Amount of Each Receipt this Period
 250.00
 Tammy Baldwin Earmarks

C. Ms. Janet R Jepsen
 Full Name (Last, First, Middle Initial)
 Mailing Address 509 Mountainview Drive
 City State Zip Code
 Wayne PA 19087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Psychotherapist
 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
 12 / 05 / 2011
Transaction ID : 3123054
 Amount of Each Receipt this Period
 100.00
 Tammy Baldwin Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 360.00 |
| 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 1030 OF 2452 |
| | <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. Clairan Ferrono
 Full Name (Last, First, Middle Initial)
 Mailing Address 5432 S Dorchester Ave.
 City Chicago State IL Zip Code 60615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 27 / 2011**
Transaction ID : 3139544
 Amount of Each Receipt this Period **50.00**
 Tammy Baldwin Earmarks

B. Mr. Richard R. Gray
 Full Name (Last, First, Middle Initial)
 Mailing Address 131 Riverside Dr., 1-A
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 01 / 2011**
Transaction ID : 3120156
 Amount of Each Receipt this Period **100.00**
 Tammy Baldwin Earmarks

C. James Gartner
 Full Name (Last, First, Middle Initial)
 Mailing Address 78 Knapp ave apt b
 City Clifton State NJ Zip Code 07011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sika Corporation Occupation mail clerk
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 06 / 2011**
Transaction ID : 3123162
 Amount of Each Receipt this Period **10.00**
 Tammy Baldwin Earmarks

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 160.00 |
| 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 1031 OF 2452 |
| | <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. Viviana Sanchez
 Full Name (Last, First, Middle Initial)
 Mailing Address 1119 19 th street
 City Bellingham State WA Zip Code 98225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer St. Joseph Hospital Occupation Social Worker
 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
 12 / 13 / 2011
Transaction ID : 3127127
 Amount of Each Receipt this Period
 5.00
 Tammy Baldwin Earmarks

B. Ms. Anne Campbell
 Full Name (Last, First, Middle Initial)
 Mailing Address 1210 Spruce Street
 City Philadelphia State PA Zip Code 19107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U of PA Occupation analyst
 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
 12 / 12 / 2011
Transaction ID : 3127104
 Amount of Each Receipt this Period
 150.00
 Tammy Baldwin Earmarks

C. Ms. Martha Stampfer
 Full Name (Last, First, Middle Initial)
 Mailing Address 7290 Sayre Drive
 City Oakland State CA Zip Code 94611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U. California Occupation biologist
 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
 12 / 09 / 2011
Transaction ID : 3126576
 Amount of Each Receipt this Period
 20.00
 Tammy Baldwin Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 175.00 |
| 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 1032 OF 2452 |
| | <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. Susan S. Kirschenbaum
Full Name (Last, First, Middle Initial)
Mailing Address 1783 South Rd.
City Kingston State RI Zip Code 02881
FEC ID number of contributing federal political committee. **C**
Name of Employer U.S. Navy, NVWC Occupation Eng. Psychologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 15 / 2011
Transaction ID : 3129897
Amount of Each Receipt this Period 100.00
Tammy Baldwin Earmarks

B. Mary Louise Sejda
Full Name (Last, First, Middle Initial)
Mailing Address 6228 Forest Ave.
City Hammond State IN Zip Code 46324
FEC ID number of contributing federal political committee. **C**
Name of Employer UNIV OF CHICAGO HOSPITALS Occupation ASST DIRECTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 09 / 2011
Transaction ID : 3126595
Amount of Each Receipt this Period 20.00
Tammy Baldwin Earmarks

C. Mr. Robert H. Schor
Full Name (Last, First, Middle Initial)
Mailing Address 10 Ambassador Drive
City Rochester State NY Zip Code 14610
FEC ID number of contributing federal political committee. **C**
Name of Employer University of Pittsburgh Occupation Faculty
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt 12 / 20 / 2011
Transaction ID : 3132567
Amount of Each Receipt this Period 166.66
Tammy Baldwin Earmarks

SUBTOTAL of Receipts This Page (optional).....▶ 286.66
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 1033 OF 2452 |
| | <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. Mary Bashore
Full Name (Last, First, Middle Initial)

Mailing Address 31 Allen RD

| | | |
|-----------------|-------------|-------------------|
| City Ephrata | State PA | Zip Code 17522 |
|-----------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3120176

Amount of Each Receipt this Period
 5.00

Tammy Duckworth Earmarked Contributions

B. Mr. James Crawford
Full Name (Last, First, Middle Initial)

Mailing Address 5760 Citrus Ave

| | | |
|------------------|-------------|-------------------|
| City Whittier | State CA | Zip Code 90601 |
|------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3120182

Amount of Each Receipt this Period
 20.00

Tammy Duckworth Earmarked Contributions

C. Ms. Phyllis Gardner
Full Name (Last, First, Middle Initial)

Mailing Address 406 Tennessee Glen Way

| | | |
|---------------------|-------------|-------------------|
| City Mill Valley | State CA | Zip Code 94941 |
|---------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2011
Transaction ID : 3120257

Amount of Each Receipt this Period
 10.00

Tammy Duckworth Earmarked Contributions

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 35.00 |
| 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 1034 OF 2452 |
| | <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. Joan Hubbell
Full Name (Last, First, Middle Initial)

Mailing Address 509 Aurora Ave Unit 420

City Naperville State IL Zip Code 60540

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 ▼ 0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123083

Amount of Each Receipt this Period
20.00

Tammy Duckworth Earmarked Contributions

B. Ms. Mary Lyons
Full Name (Last, First, Middle Initial)

Mailing Address 36 Barkley Cir.

City Fort Myers State FL Zip Code 33907

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 ▼ 0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123100

Amount of Each Receipt this Period
20.00

Tammy Duckworth Earmarked Contributions

C. Ms. Beverlee Mitchell
Full Name (Last, First, Middle Initial)

Mailing Address 3012 West Hollywood Avenue

City Chicago State IL Zip Code 60659

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 ▼ 0.00

Date of Receipt
12 / 06 / 2011
Transaction ID : 3123174

Amount of Each Receipt this Period
100.00

Tammy Duckworth Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00

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 1035 OF 2452 |
| | <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 O. Newcomb
Full Name (Last, First, Middle Initial)

Mailing Address 5355 Pooks Hill Rd.

City Bethesda State MD Zip Code 20814

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123425

Amount of Each Receipt this Period
 20.00

Tammy Duckworth Earmarked Contributions

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

Mailing Address 805 Glen Oak Dr

City Lebanon State OR Zip Code 97355

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123453

Amount of Each Receipt this Period
 10.00

Tammy Duckworth Earmarked Contributions

C. Ms. Susan P. Nye
Full Name (Last, First, Middle Initial)

Mailing Address 671 Roxborough Avenue

City Philadelphia State PA Zip Code 19128

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123494

Amount of Each Receipt this Period
 8.33

Tammy Duckworth Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 38.33

TOTAL This Period (last page this line 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 1036 OF 2452 |
| | <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. Ruth Giese
Full Name (Last, First, Middle Initial)
Mailing Address 12 Asbury Avenue

| | | |
|--------------------|-------------|-------------------|
| City Binghamton | State NY | Zip Code 13901 |
|--------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 08 | / | 2011 |

Transaction ID : 3125005

Amount of Each Receipt this Period

| |
|-------|
| 25.00 |
|-------|

 Tammy Duckworth Earmarked Contributions

B. Ms. Mary Jefferson
Full Name (Last, First, Middle Initial)
Mailing Address 5235 E Fern Haven Ln.

| | | |
|-----------------|-------------|-------------------|
| City Anaheim | State CA | Zip Code 92807 |
|-----------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 08 | / | 2011 |

Transaction ID : 3125017

Amount of Each Receipt this Period

| |
|-------|
| 20.00 |
|-------|

 Tammy Duckworth Earmarked Contributions

C. Ms. Susan Townsend
Full Name (Last, First, Middle Initial)
Mailing Address 112 Thruston Boulevard E.

| | | |
|----------------|-------------|-------------------|
| City Dayton | State OH | Zip Code 45409 |
|----------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 08 | / | 2011 |

Transaction ID : 3125028

Amount of Each Receipt this Period

| |
|-------|
| 25.00 |
|-------|

 Tammy Duckworth Earmarked Contributions

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 70.00 |
| 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 1037 OF 2452 |
| | (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. Donna E. Willoughby
Full Name (Last, First, Middle Initial)

Mailing Address 22 Lake Creek Rd.

| | | |
|----------------|-------------|-------------------|
| City Salmon | State ID | Zip Code 83467 |
|----------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : 3125048

Amount of Each Receipt this Period

| |
|-------|
| 50.00 |
|-------|

 Tammy Duckworth Earmarked Contributions

B. Ms. Christina D. Baker
Full Name (Last, First, Middle Initial)

Mailing Address 1150 Willow Glen Way

| | | |
|------------------|-------------|-------------------|
| City San Jose | State CA | Zip Code 95125 |
|------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : 3125060

Amount of Each Receipt this Period

| |
|-------|
| 50.00 |
|-------|

 Tammy Duckworth Earmarked Contributions

C. Mr. Paul Lerman
Full Name (Last, First, Middle Initial)

Mailing Address 413 W Englewood Ave

| | | |
|-----------------|-------------|-------------------|
| City Teaneck | State NJ | Zip Code 07666 |
|-----------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : 3125063

Amount of Each Receipt this Period

| |
|--------|
| 100.00 |
|--------|

 Tammy Duckworth Earmarked Contributions

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 200.00 |
| 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 1038 OF 2452 |
| | <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. Gail Silverstone
Full Name (Last, First, Middle Initial)

Mailing Address 6633 32 Place, NW
32nd Place, NW

City Washington, State DC Zip Code 20015

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 ▼
0.00

Date of Receipt
12 / 09 / 2011
Transaction ID : 3126625

Amount of Each Receipt this Period
33.33

Tammy Duckworth Earmarked Contributions

B. Ms. B. Kay Kinnear
Full Name (Last, First, Middle Initial)

Mailing Address 621B Idlewild Circle

City Birmingham State AL Zip Code 35205

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 ▼
0.00

Date of Receipt
12 / 12 / 2011
Transaction ID : 3126828

Amount of Each Receipt this Period
100.00

Tammy Duckworth Earmarked Contributions

C. Mrs. Emily Rauh Pulitzer
Full Name (Last, First, Middle Initial)

Mailing Address 4903 Pershing Pl.

City Saint Louis State MO Zip Code 63108

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 ▼
0.00

Date of Receipt
12 / 12 / 2011
Transaction ID : 3127083

Amount of Each Receipt this Period
250.00

Tammy Duckworth Earmarked Contributions

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 383.33 |
| TOTAL This Period (last page this line 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 1039 OF 2452 |
| | (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. Joyanne B. Mills

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 n/a | Occupation Retired |
|-------------------------|-----------------------|

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 |
| 12 | / | 13 | / | 2011 |

Transaction ID : 3127122

Amount of Each Receipt this Period
125.00

Tammy Duckworth Earmarked Contributions

Full Name (Last, First, Middle Initial)
B. Ms. Marianne Bayley

Mailing Address 7501 Cumberland Rd., # 26

| | | |
|------------------|-------------|-------------------|
| City Seminole | State FL | Zip Code 33777 |
|------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 13 | / | 2011 |

Transaction ID : 3127141

Amount of Each Receipt this Period
20.00

Tammy Duckworth Earmarked Contributions

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

Mailing Address 2 West 3rd Ave.

| | | |
|-------------------|-------------|-------------------|
| City Johnstown | State NY | Zip Code 12095 |
|-------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : 3129890

Amount of Each Receipt this Period
50.00

Tammy Duckworth Earmarked Contributions

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 195.00 |
| 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 1040 OF 2452 |
| | <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. Peg French
Full Name (Last, First, Middle Initial)
Mailing Address 544 Kemmerer Road

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| State College | PA | 16801 |

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129900

Amount of Each Receipt this Period
 25.00

Tammy Duckworth Earmarked Contributions

B. Mrs. Gloria M. Gray
Full Name (Last, First, Middle Initial)
Mailing Address 436 Crestover Circle

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Richardson | TX | 75080 |

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129918

Amount of Each Receipt this Period
 20.00

Tammy Duckworth Earmarked Contributions

C. Ms. Sydney Story
Full Name (Last, First, Middle Initial)
Mailing Address 205 E Terrace Ave

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Fresno | CA | 93704 |

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131747

Amount of Each Receipt this Period
 10.00

Tammy Duckworth Earmarked Contributions

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 55.00 |
| 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 1041 OF 2452 |
| | <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. Lillian P Davis
Full Name (Last, First, Middle Initial)

Mailing Address 108 Boulder Rd

City Plymouth Meeting State PA Zip Code 19462

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3131750

Amount of Each Receipt this Period
 5.00

Tammy Duckworth Earmarked Contributions

B. Ms. Rita Lepscier
Full Name (Last, First, Middle Initial)

Mailing Address 18511 Pine Lake Dr Apt 1

City Tinley Park State IL Zip Code 60477

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3131760

Amount of Each Receipt this Period
 10.00

Tammy Duckworth Earmarked Contributions

C. Mr. Fred Martin
Full Name (Last, First, Middle Initial)

Mailing Address 55 Holmes Ranch Rd
PO Box 328

City Philo State CA Zip Code 95466

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011

Transaction ID : 3131795

Amount of Each Receipt this Period
 20.00

Tammy Duckworth Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 35.00

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 1042 OF 2452 |
| | <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. Bernard Shyffer
Full Name (Last, First, Middle Initial)

Mailing Address 4212 Palos Verdes Drive E

City Rancho Pls. Vrd. State CA Zip Code 90275

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 ▼ 0.00

Date of Receipt 12 / 20 / 2011
Transaction ID : 3132545

Amount of Each Receipt this Period 100.00

Tammy Duckworth Earmarked Contributions

B. Ms. Harriet S. S Growick
Full Name (Last, First, Middle Initial)

Mailing Address 3850 Washington Street #916 #916

City Hollywood State FL Zip Code 33021

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 ▼ 0.00

Date of Receipt 12 / 20 / 2011
Transaction ID : 3132565

Amount of Each Receipt this Period 18.00

Tammy Duckworth Earmarked Contributions

C. Mr. Merle D. Borchers
Full Name (Last, First, Middle Initial)

Mailing Address 2346 78th Street E

City Inver Grove State MN Zip Code 55076

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 ▼ 0.00

Date of Receipt 12 / 27 / 2011
Transaction ID : 3139537

Amount of Each Receipt this Period 6.66

Tammy Duckworth Earmarked Contributions

SUBTOTAL of Receipts This Page (optional).....▶ 124.66

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 1043 OF 2452 |
| | <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. Karen Rothblatt
 Full Name (Last, First, Middle Initial)
 Mailing Address 1337 Derby St
 City Berkeley State CA Zip Code 94702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Alameda Hospital Occupation RN
 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
 12 / 27 / 2011
Transaction ID : 3139514
 Amount of Each Receipt this Period
 8.33
 Tammy Duckworth Earmarked Contributions

B. Ms. Judi Fishman
 Full Name (Last, First, Middle Initial)
 Mailing Address 923 W Webster Ave
 City Chicago State IL Zip Code 60614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Federal Street Holdings Occupation REAL ESTATE EXEC
 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
 12 / 27 / 2011
Transaction ID : 3139530
 Amount of Each Receipt this Period
 25.00
 Tammy Duckworth Earmarked Contributions

C. Ms. Gerrie Barclay
 Full Name (Last, First, Middle Initial)
 Mailing Address 32241 Southfield Road
 City Birmingham State MI Zip Code 48025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Fitz Public Schls Occupation Bilingual Coordinator
 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
 12 / 01 / 2011
Transaction ID : 3120215
 Amount of Each Receipt this Period
 50.00
 Tammy Duckworth Earmarked Contributions

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 83.33 |
| TOTAL This Period (last page this line 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 1044 OF 2452 |
| | <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. Marianita Meyer
Full Name (Last, First, Middle Initial)

Mailing Address 425 Park Ave. South
Apt. 18C

City New York State NY Zip Code 10016

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

Name of Employer Kreindler & Kreindler Occupation Legal Assistant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 27 / 2011
Transaction ID : 3139502

Amount of Each Receipt this Period
33.33

Tammy Duckworth Earmarked Contributions

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

Mailing Address 6757 Vermar Ter

City Eden Prairie State MN Zip Code 55346

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

Name of Employer maverick tech Occupation engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 02 / 2011
Transaction ID : 3120282

Amount of Each Receipt this Period
10.00

Tammy Duckworth Earmarked Contributions

C. Ms. Alice A. Kleinhans
Full Name (Last, First, Middle Initial)

Mailing Address 45 North St.

City Andover State MA Zip Code 01810

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

Name of Employer Merrimack Valley Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3122994

Amount of Each Receipt this Period
100.00

Tammy Duckworth Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 143.33

TOTAL This Period (last page this line 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 1045 OF 2452 |
| | <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. Leslie H. Pierpont
Full Name (Last, First, Middle Initial)

Mailing Address 4157 ortega blvd

City Jacksonville State FL Zip Code 32210

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

Name of Employer Occupation
Native and Uncommon Plants Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 14 / 2011
Transaction ID : 3127259

Amount of Each Receipt this Period
10.00

Tammy Duckworth Earmarked Contributions

B. Ms. Diane Steets
Full Name (Last, First, Middle Initial)

Mailing Address 75 Pemberton Aveue

City Oceanport State NJ Zip Code 07757

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

Name of Employer Occupation
None Retired Educator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123102

Amount of Each Receipt this Period
5.00

Tammy Duckworth Earmarked Contributions

C. Ms. Frances Y. Smith
Full Name (Last, First, Middle Initial)

Mailing Address 30667 Mystic Forest Drive

City Farmington Hill State MI Zip Code 48331

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

Name of Employer Occupation
Oakland Comm. College Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 08 / 2011
Transaction ID : 3125011

Amount of Each Receipt this Period
16.66

Tammy Duckworth Earmarked Contributions

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 31.66 |
| 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 1046 OF 2452 |
| | <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. Ruth Fredericks
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Peter Cooper Rd
 Apt. 14E
 City New York State NY Zip Code 10010
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3120069
 Amount of Each Receipt this Period
 10.00
 Tammy Duckworth Earmarked Contributions

B. Ms. Harriet Steinberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 1731 Beacon Street, Apt. 210
 City Brookline State MA Zip Code 02445
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3120073
 Amount of Each Receipt this Period
 25.00
 Tammy Duckworth Earmarked Contributions

C. Ms. Barbara D. Boggs
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 W. 147th Street # 21E
 City New York State NY Zip Code 10039
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2011
Transaction ID : 3120190
 Amount of Each Receipt this Period
 20.00
 Tammy Duckworth Earmarked Contributions

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 55.00 |
| 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 1047 OF 2452 |
| | <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. Susan Oleshko
 Full Name (Last, First, Middle Initial)
 Mailing Address 287 W 5th St.
 City Deer Park State NY Zip Code 11729
 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 0.00

Date of Receipt
 12 / 01 / 2011
Transaction ID : 3120200
 Amount of Each Receipt this Period 25.00
 Tammy Duckworth Earmarked Contributions

B. Ms. Joslen Letscher
 Full Name (Last, First, Middle Initial)
 Mailing Address 41120 Fox Run, Apt. T19
 City Novi State MI Zip Code 48377
 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 0.00

Date of Receipt
 12 / 01 / 2011
Transaction ID : 3120206
 Amount of Each Receipt this Period 25.00
 Tammy Duckworth Earmarked Contributions

C. Mr. Peter Lemkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 14825 Keeneland Circle
 City North Potomac State MD Zip Code 20878
 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 0.00

Date of Receipt
 12 / 01 / 2011
Transaction ID : 3120221
 Amount of Each Receipt this Period 5.00
 Tammy Duckworth Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 1048 OF 2452 |
| | <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. William Kornfeld
Full Name (Last, First, Middle Initial)

Mailing Address 1304 Bobbi Ct.

City Bowling Green State KY Zip Code 42103

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 ▼ 0.00

Date of Receipt
12 / 02 / 2011
Transaction ID : 3120239

Amount of Each Receipt this Period
33.33

Tammy Duckworth Earmarked Contributions

B. Ms. Carlyn Halde
Full Name (Last, First, Middle Initial)

Mailing Address 63 Park Hill Ave.

City San Francisco State CA Zip Code 94117

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 ▼ 0.00

Date of Receipt
12 / 02 / 2011
Transaction ID : 3120245

Amount of Each Receipt this Period
50.00

Tammy Duckworth Earmarked Contributions

C. Ms. N. Laura Middleton M.D.
Full Name (Last, First, Middle Initial)

Mailing Address 8 Windridge Rd.

City Essex Junction State VT Zip Code 05452

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 ▼ 0.00

Date of Receipt
12 / 02 / 2011
Transaction ID : 3120251

Amount of Each Receipt this Period
83.33

Tammy Duckworth Earmarked Contributions

SUBTOTAL of Receipts This Page (optional).....▶ 166.66

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: PAGE 1049 OF 2452
(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. Ken Wilson
 Full Name (Last, First, Middle Initial)
 Mailing Address 965 Kelly Blvd
 City Springfield State OR Zip Code 97477
 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 ▼ 0.00

Date of Receipt
 12 / 02 / 2011
Transaction ID : 3120264
 Amount of Each Receipt this Period 10.00
 Tammy Duckworth Earmarked Contributions

B. Ms. Isabel Labriola
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 10794
 City Zephyr Cove State NV Zip Code 89448
 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 ▼ 0.00

Date of Receipt
 12 / 02 / 2011
Transaction ID : 3120272
 Amount of Each Receipt this Period 20.00
 Tammy Duckworth Earmarked Contributions

C. Ms. Janet Beal
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 Thistle Way
 City Binghamton State NY Zip Code 13901
 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 ▼ 0.00

Date of Receipt
 12 / 02 / 2011
Transaction ID : 3120276
 Amount of Each Receipt this Period 25.00
 Tammy Duckworth Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 1050 OF 2452 |
| | <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. Harriette C. Buchanan
Full Name (Last, First, Middle Initial)

Mailing Address 194 Eastview Dr.

City Boone State NC Zip Code 28607

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 ▼ **0.00**

Date of Receipt **12 / 05 / 2011**

Transaction ID : 3123000

Amount of Each Receipt this Period **20.00**

Tammy Duckworth Earmarked Contributions

B. Ms. Judith Wilcox
Full Name (Last, First, Middle Initial)

Mailing Address 26988 Heatherford Dr., Apt. 3

City Perrysburg State OH Zip Code 43551

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 ▼ **0.00**

Date of Receipt **12 / 05 / 2011**

Transaction ID : 3123006

Amount of Each Receipt this Period **6.66**

Tammy Duckworth Earmarked Contributions

C. Ms. Patricia S. Byard
Full Name (Last, First, Middle Initial)

Mailing Address 3615 Maidu Pl.

City Davis State CA Zip Code 95618

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 ▼ **0.00**

Date of Receipt **12 / 05 / 2011**

Transaction ID : 3123012

Amount of Each Receipt this Period **100.00**

Tammy Duckworth Earmarked Contributions

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 126.66 |
| 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 1051 OF 2452 |
| | <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. Muriel I. Patterson | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123018 |
| Mailing Address 900 Hill Street | | Amount of Each Receipt this Period 10.00 |
| City Broomfield | State CO | Zip Code 80023 |
| FEC ID number of contributing federal political committee. C | | Tammy Duckworth Earmarked Contributions |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr. Michael Burt | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123024 |
| Mailing Address 505 13th St. SE, Apt. 1 | | Amount of Each Receipt this Period 100.00 |
| City Washington | State DC | Zip Code 20003 |
| FEC ID number of contributing federal political committee. C | | Tammy Duckworth Earmarked Contributions |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. M. J. McAdam | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123030 |
| Mailing Address 710 Bird Bay Dr W | | Amount of Each Receipt this Period 20.00 |
| City Venice | State FL | Zip Code 34285 |
| FEC ID number of contributing federal political committee. C | | Tammy Duckworth Earmarked Contributions |
| 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 ▼ 0.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 130.00 |
| 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 1052 OF 2452 |
| | <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 House
Full Name (Last, First, Middle Initial)
Mailing Address 699 Lost River Road

| | | |
|----------------|-------------|-------------------|
| City Mazama | State WA | Zip Code 98833 |
|----------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123042

Amount of Each Receipt this Period
20.00

Tammy Duckworth Earmarked Contributions

B. Ms. Markate Daly
Full Name (Last, First, Middle Initial)
Mailing Address 2730 Parker St.

| | | |
|------------------|-------------|-------------------|
| City Berkeley | State CA | Zip Code 94704 |
|------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123046

Amount of Each Receipt this Period
50.00

Tammy Duckworth Earmarked Contributions

C. Ms. Yvette L. Gunn
Full Name (Last, First, Middle Initial)
Mailing Address 2328 Oakview Rd NE

| | | |
|-----------------|-------------|-------------------|
| City Atlanta | State GA | Zip Code 30317 |
|-----------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123049

Amount of Each Receipt this Period
10.00

Tammy Duckworth Earmarked Contributions

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 80.00 |
| 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 1053 OF 2452 |
| | <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. John W. Bakhuls
Full Name (Last, First, Middle Initial)

Mailing Address 6 Scottsdale Way # 1

City Novato State CA Zip Code 94947

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 ▼ 0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123061

Amount of Each Receipt this Period
15.00

Tammy Duckworth Earmarked Contributions

B. Ms. Eva Kelley
Full Name (Last, First, Middle Initial)

Mailing Address 760 N 2nd St., Apt. 18

City Paragould State AR Zip Code 72450

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 ▼ 0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123067

Amount of Each Receipt this Period
2.00

Tammy Duckworth Earmarked Contributions

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

Mailing Address 301 Aden Ct.

City Upper Marlboro State MD Zip Code 20774

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 ▼ 0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123073

Amount of Each Receipt this Period
4.16

Tammy Duckworth Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 21.16

TOTAL This Period (last page this line 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 1054 OF 2452 |
| | <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. Pat Sibley | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2011 |
| Mailing Address 118 SW 116th Street Apt. D24 | | Transaction ID : 3123094 |
| City Seattle | State WA | Zip Code 98146 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 2.00 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Tammy Duckworth Earmarked Contributions |
| 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. Ms. Dolores McCullough | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2011 |
| Mailing Address 21415 33rd Ave. | | Transaction ID : 3123138 |
| City Bayside | State NY | Zip Code 11361 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 10.00 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Tammy Duckworth Earmarked Contributions |
| 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. Carol Detweiler | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2011 |
| Mailing Address 1704 Shadford Rd. | | Transaction ID : 3123148 |
| City Ann Arbor | State MI | Zip Code 48104 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25.00 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Tammy Duckworth Earmarked Contributions |
| 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).....▶ | 37.00 |
| 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 1055 OF 2452 |
| | <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. Mr. Curtis J. Eaton
Full Name (Last, First, Middle Initial)

Mailing Address 622 Hall Blvd

City Mason State MI Zip Code 48854

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2011

Transaction ID : 3123155

Amount of Each Receipt this Period
 20.00

Tammy Duckworth Earmarked Contributions

B. Mr. Rowland Bell
Full Name (Last, First, Middle Initial)

Mailing Address 606 Fords Landing Way

City Alexandria State VA Zip Code 22314

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123419

Amount of Each Receipt this Period
 200.00

Tammy Duckworth Earmarked Contributions

C. Mrs. Katherine Horowitz
Full Name (Last, First, Middle Initial)

Mailing Address 2173 Glenkirk Drive

City San Jose State CA Zip Code 95124

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011

Transaction ID : 3123431

Amount of Each Receipt this Period
 20.00

Tammy Duckworth Earmarked Contributions

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 240.00 |
| 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 1056 OF 2452 |
| | <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. Betty Armstrong
Full Name (Last, First, Middle Initial)
Mailing Address 16221 SE 29th St

| | | |
|------------------|-------------|-------------------|
| City Bellevue | State WA | Zip Code 98008 |
|------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123462

Amount of Each Receipt this Period
16.66

Tammy Duckworth Earmarked Contributions

B. Robert E. Laveine
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 412

| | | |
|-------------------------|-------------|-------------------|
| City West Burlington | State IA | Zip Code 52655 |
|-------------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123472

Amount of Each Receipt this Period
100.00

Tammy Duckworth Earmarked Contributions

C. Joyce Goodman
Full Name (Last, First, Middle Initial)
Mailing Address 1140 5th Avenue

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10128 |
|------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123478

Amount of Each Receipt this Period
100.00

Tammy Duckworth Earmarked Contributions

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 216.66 |
| 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: | PAGE 1057 OF 2452 |
| | (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. Maria Micola
Full Name (Last, First, Middle Initial)

Mailing Address 1215 Cedar Grove Rd

City State Zip Code
Media PA 19063

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 ▼
0.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123488

Amount of Each Receipt this Period
20.00

Tammy Duckworth Earmarked Contributions

B. Mr. Donald J. Sutherland
Full Name (Last, First, Middle Initial)

Mailing Address 2221 Ocean Ave., Apt. 108

City State Zip Code
Santa Monica CA 90405

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 ▼
0.00

Date of Receipt
12 / 08 / 2011
Transaction ID : 3125024

Amount of Each Receipt this Period
20.00

Tammy Duckworth Earmarked Contributions

C. Ms. Elsie Murray
Full Name (Last, First, Middle Initial)

Mailing Address 1429 Beulah Rd

City State Zip Code
Pittsburgh PA 15235

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 ▼
0.00

Date of Receipt
12 / 08 / 2011
Transaction ID : 3125034

Amount of Each Receipt this Period
25.00

Tammy Duckworth Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00

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 1058 OF 2452 |
| | <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. Catheine O'Connor

Mailing Address 429 Josiah Bartlett Rd.

City State Zip Code
Concord NH 03301

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125054

Amount of Each Receipt this Period
0.00

Tammy Duckworth Earmarked Contributions

Full Name (Last, First, Middle Initial)
B. Ms. Martha Pheneger

Mailing Address 2310 Sky View Ln.

City State Zip Code
Laramie WY 82070

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125066

Amount of Each Receipt this Period
15.00

Tammy Duckworth Earmarked Contributions

Full Name (Last, First, Middle Initial)
C. Mr. Carl Duzen

Mailing Address 520 Kathmere Road

City State Zip Code
Havertown PA 19083

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125074

Amount of Each Receipt this Period
50.00

Tammy Duckworth Earmarked Contributions

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 68.33 |
| TOTAL This Period (last page this line 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 1059 OF 2452 |
| | <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. John Quirk
Full Name (Last, First, Middle Initial)

Mailing Address 19103 Pala Mesa Place

City Porter Ranch State CA Zip Code 91326

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 ▼ 0.00

Date of Receipt
12 / 09 / 2011
Transaction ID : 3126556

Amount of Each Receipt this Period
50.00

Tammy Duckworth Earmarked Contributions

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

Mailing Address 2323 Simpson St.

City Evanston State IL Zip Code 60201

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 ▼ 0.00

Date of Receipt
12 / 09 / 2011
Transaction ID : 3126560

Amount of Each Receipt this Period
2.50

Tammy Duckworth Earmarked Contributions

C. Ms. Joan Kowalski
Full Name (Last, First, Middle Initial)

Mailing Address 54275 Bradshaw DR

City New Baltimore State MI Zip Code 48047

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 ▼ 0.00

Date of Receipt
12 / 09 / 2011
Transaction ID : 3126569

Amount of Each Receipt this Period
8.33

Tammy Duckworth Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.83

TOTAL This Period (last page this line 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 1060 OF 2452 |
| | <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. Carole C. Allen
 Full Name (Last, First, Middle Initial)
 Mailing Address 180 Montana Drive
 City Danville State CA Zip Code 94526
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3126575
 Amount of Each Receipt this Period
 2.50
 Tammy Duckworth Earmarked Contributions

B. Ms. Betty S. Tunstall
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1091
 City Black Canyon City State AZ Zip Code 85324
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3126594
 Amount of Each Receipt this Period
 10.00
 Tammy Duckworth Earmarked Contributions

C. Ms. Laura Steele
 Full Name (Last, First, Middle Initial)
 Mailing Address 10509 Hutting Pl.
 City Silver Spring State MD Zip Code 20902
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
Transaction ID : 3126613
 Amount of Each Receipt this Period
 20.00
 Tammy Duckworth Earmarked Contributions

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 32.50 |
| TOTAL This Period (last page this line 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 1061 OF 2452 |
| | <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. Dorothea R. Crisp | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 Transaction ID : 3126619 |
| Mailing Address 1245 SW Walking Wood | | Amount of Each Receipt this Period 20.00 Tammy Duckworth Earmarked Contributions |
| City Depoe Bay | State OR | Zip Code 97341 |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Bernardo Hollman | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2011 Transaction ID : 3127091 |
| Mailing Address 10237 Autumnview Ln | | Amount of Each Receipt this Period 2.00 Tammy Duckworth Earmarked Contributions |
| City San Diego | State CA | Zip Code 92126 |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Susan Dennehy | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2011 Transaction ID : 3127103 |
| Mailing Address 240 Central Park S. | | Amount of Each Receipt this Period 12.50 Tammy Duckworth Earmarked Contributions |
| City New York | State NY | Zip Code 10019 |
| 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 ▼ 0.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 34.50 |
| TOTAL This Period (last page this line 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 1062 OF 2452 |
| | (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. Mr. Peter Henning
Full Name (Last, First, Middle Initial)

Mailing Address 8485 Hunts Point Ln

City Hunts Point State WA Zip Code 98004

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2011

Transaction ID : 3127138

Amount of Each Receipt this Period
 10.00

Tammy Duckworth Earmarked Contributions

B. Ms. Carolyn Thomas
Full Name (Last, First, Middle Initial)

Mailing Address 7409 Flower Ave.

City Takoma Park State MD Zip Code 20912

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011

Transaction ID : 3127272

Amount of Each Receipt this Period
 25.00

Tammy Duckworth Earmarked Contributions

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

Mailing Address 58 Grandview Ave.

City Kingston State NY Zip Code 12401

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : 3129896

Amount of Each Receipt this Period
 10.00

Tammy Duckworth Earmarked Contributions

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 45.00 |
| 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 1063 OF 2452 |
| | <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. Nancy Richards
Full Name (Last, First, Middle Initial)
Mailing Address 5207 Church Drive

| | | |
|--------------------|-------------|-------------------|
| City Charleston | State WV | Zip Code 25306 |
|--------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129910

Amount of Each Receipt this Period
20.00

Tammy Duckworth Earmarked Contributions

B. Ms. Charlotte Alexandre
Full Name (Last, First, Middle Initial)
Mailing Address 10345 Adams Pl

| | | |
|------------------|-------------|-------------------|
| City Thornton | State CO | Zip Code 80229 |
|------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3131730

Amount of Each Receipt this Period
10.00

Tammy Duckworth Earmarked Contributions

C. Ms. Elizabeth Niccolls
Full Name (Last, First, Middle Initial)
Mailing Address 800 S 15th St Unit 1631

| | | |
|-----------------|-------------|-------------------|
| City Sebring | State OH | Zip Code 44672 |
|-----------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3131733

Amount of Each Receipt this Period
14.29

Tammy Duckworth Earmarked Contributions

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 44.29 |
| TOTAL This Period (last page this line 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 1064 OF 2452 |
| | <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. Mithlesh Prakash
 Full Name (Last, First, Middle Initial)
 Mailing Address 2665 Condor Cir
 City Corona State CA Zip Code 92882
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131758
 Amount of Each Receipt this Period
 8.50
 Tammy Duckworth Earmarked Contributions

B. Ms. Cynthia A. Arnold
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 14473
 City San Francisco State CA Zip Code 94114
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131767
 Amount of Each Receipt this Period
 25.00
 Tammy Duckworth Earmarked Contributions

C. Ms. Louise Weschler
 Full Name (Last, First, Middle Initial)
 Mailing Address 161 Richdale Rd
 City Colts Neck State NJ Zip Code 07722
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131783
 Amount of Each Receipt this Period
 25.00
 Tammy Duckworth Earmarked Contributions

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 58.50 |
| TOTAL This Period (last page this line 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 1066 OF 2452 |
| | <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. Judy Hunter
 Full Name (Last, First, Middle Initial)
 Mailing Address 3586 Indigo Pond Dr
 City State Zip Code
 Palm Harbor FL 34685
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2011
Transaction ID : 3132557
 Amount of Each Receipt this Period
 1.67
 Tammy Duckworth Earmarked Contributions

B. Ms. Clair A. Sharpless
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Drumlin Rd.
 City State Zip Code
 West Simsbury CT 6092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 REQUESTED Homemaker
 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
 12 / 20 / 2011
Transaction ID : 3132574
 Amount of Each Receipt this Period
 100.00
 Tammy Duckworth Earmarked Contributions

C. Ms. Nancy Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 245 N Vine St Apt 903
 City State Zip Code
 Salt Lake City UT 84103
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011
Transaction ID : 3133754
 Amount of Each Receipt this Period
 10.00
 Tammy Duckworth Earmarked Contributions

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 111.67 |
| TOTAL This Period (last page this line 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 1067 OF 2452 |
| | <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. Eleanor T. Weiss
Full Name (Last, First, Middle Initial)

Mailing Address 360 Osgood Road

City Milford State NH Zip Code 03055

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 ▼ 0.00

Date of Receipt
12 / 22 / 2011
Transaction ID : 3133765

Amount of Each Receipt this Period
30.00

Tammy Duckworth Earmarked Contributions

B. Mrs. Marian Ryan
Full Name (Last, First, Middle Initial)

Mailing Address 2460 Linette Ct

City Yorktown Heights State NY Zip Code 10598

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 ▼ 0.00

Date of Receipt
12 / 22 / 2011
Transaction ID : 3133766

Amount of Each Receipt this Period
20.00

Tammy Duckworth Earmarked Contributions

C. Ms. Natalie Grigg
Full Name (Last, First, Middle Initial)

Mailing Address 92 Lakeshore Road

City Boxford State MA Zip Code 01921

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

Name of Employer REQUESTED Occupation Housewife/farmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
12 / 27 / 2011
Transaction ID : 3139501

Amount of Each Receipt this Period
100.00

Tammy Duckworth Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 1068 OF 2452 |
| | <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. Patricia Froman
Full Name (Last, First, Middle Initial)
Mailing Address 214 Parliament Dr.
City Coraopolis State PA Zip Code 15108
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 ▼ 0.00

Date of Receipt
12 / 27 / 2011
Transaction ID : 3139521
Amount of Each Receipt this Period 20.00
Tammy Duckworth Earmarked Contributions

B. Ms. Mary Nicolls
Full Name (Last, First, Middle Initial)
Mailing Address 1830 Garden Dr.
City Medford State OR Zip Code 97504
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 ▼ 0.00

Date of Receipt
12 / 27 / 2011
Transaction ID : 3139538
Amount of Each Receipt this Period 40.00
Tammy Duckworth Earmarked Contributions

C. Ms. Katha D. Massey
Full Name (Last, First, Middle Initial)
Mailing Address 270 Victoria Street
City Commerce State GA Zip Code 30529
FEC ID number of contributing federal political committee. **C**
Name of Employer REQUESTED Occupation Librarian
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0.00

Date of Receipt
12 / 29 / 2011
Transaction ID : 3139559
Amount of Each Receipt this Period 50.00
Tammy Duckworth Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 1069 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Ms. Colleen B. Dipaul | | Date of Receipt 12 / 29 / 2011 Transaction ID : 3139566 |
| Mailing Address PO Box 95 | | Amount of Each Receipt this Period 15.00 |
| City Rector | State PA | Zip Code 15677 |
| FEC ID number of contributing federal political committee. C | Tammy Duckworth Earmarked Contributions | |
| 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 ▼ 0.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Nessa Peters | | Date of Receipt 12 / 14 / 2011 Transaction ID : 3127266 |
| Mailing Address 1010 cann road | | Amount of Each Receipt this Period 20.00 |
| City silver spring | State MD | Zip Code 20904 |
| FEC ID number of contributing federal political committee. C | Tammy Duckworth Earmarked Contributions | |
| Name of Employer retired | Occupation teacher | |
| 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. Ms. Marciarose Shestack | | Date of Receipt 12 / 19 / 2011 Transaction ID : 3131777 |
| Mailing Address 2201 Pennsylvania Avenue | | Amount of Each Receipt this Period 16.67 |
| City Philadelphia | State PA | Zip Code 19130 |
| FEC ID number of contributing federal political committee. C | Tammy Duckworth Earmarked Contributions | |
| Name of Employer retired | Occupation TV anchor journalist | |
| 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).....▶ | 51.67 |
| TOTAL This Period (last page this line 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 1070 OF 2452 |
| | <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. Maura H. Albert
Full Name (Last, First, Middle Initial)
Mailing Address 19 Wyman Terrace

| | | |
|-------------------|-------------|-------------------|
| City Arlington | State MA | Zip Code 02474 |
|-------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 27 | / | 2011 |

Transaction ID : 3139516

Amount of Each Receipt this Period

| |
|-------|
| 25.00 |
|-------|

 Tammy Duckworth Earmarked Contributions

B. Ms. Judith Rogovin
Full Name (Last, First, Middle Initial)
Mailing Address 4556 Forest Wood Trl

| | | |
|------------------|-------------|-------------------|
| City Sarasota | State FL | Zip Code 34241 |
|------------------|-------------|-------------------|

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

| | |
|---|-----------------------|
| Name of Employer Saint Paul Public Schls | Occupation Teacher |
|---|-----------------------|

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 |
| 12 | / | 20 | / | 2011 |

Transaction ID : 3132558

Amount of Each Receipt this Period

| |
|------|
| 0.84 |
|------|

 Tammy Duckworth Earmarked Contributions

C. Mr. Andrew Carson
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 709

| | | |
|----------------|-------------|-------------------|
| City Wilson | State WY | Zip Code 83014 |
|----------------|-------------|-------------------|

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

| | |
|--------------------------|-------------------------|
| Name of Employer self | Occupation mtn guide |
|--------------------------|-------------------------|

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 |
| 12 | / | 01 | / | 2011 |

Transaction ID : 3120166

Amount of Each Receipt this Period

| |
|-------|
| 10.00 |
|-------|

 Tammy Duckworth Earmarked Contributions

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 35.84 |
| TOTAL This Period (last page this line 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 1071 OF 2452 |
| | <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. Mr. Harry Schwartz
Full Name (Last, First, Middle Initial)

Mailing Address 50 Morningside DR

City New York State NY Zip Code 10025

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

Name of Employer self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 01 / 2011
Transaction ID : 3120192

Amount of Each Receipt this Period
 30.00

Tammy Duckworth Earmarked Contributions

B. Mr. Phillip S. Berry
Full Name (Last, First, Middle Initial)

Mailing Address 4510 Canyon Road

City Lafayette State CA Zip Code 94549

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

Name of Employer Self Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 05 / 2011
Transaction ID : 3123036

Amount of Each Receipt this Period
 250.00

Tammy Duckworth Earmarked Contributions

C. Ms. Janet R Jepsen
Full Name (Last, First, Middle Initial)

Mailing Address 509 Mountainview Drive

City Wayne State PA Zip Code 19087

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

Name of Employer Self Occupation Psychotherapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 05 / 2011
Transaction ID : 3123055

Amount of Each Receipt this Period
 100.00

Tammy Duckworth Earmarked Contributions

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 380.00 |
| 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 1072 OF 2452 |
| | <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. Clairan Ferrono
Full Name (Last, First, Middle Initial)
Mailing Address 5432 S Dorchester Ave.
City Chicago State IL Zip Code 60615
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Artist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 27 / 2011**
Transaction ID : 3139548
Amount of Each Receipt this Period **50.00**
Tammy Duckworth Earmarked Contributions

B. Mr. Richard R. Gray
Full Name (Last, First, Middle Initial)
Mailing Address 131 Riverside Dr., 1-A
City New York State NY Zip Code 10024
FEC ID number of contributing federal political committee. **C**
Name of Employer self-employed Occupation consultant
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 01 / 2011**
Transaction ID : 3120159
Amount of Each Receipt this Period **50.00**
Tammy Duckworth Earmarked Contributions

C. James Gartner
Full Name (Last, First, Middle Initial)
Mailing Address 78 Knapp ave apt b
City Clifton State NJ Zip Code 07011
FEC ID number of contributing federal political committee. **C**
Name of Employer Sika Corporation Occupation mail clerk
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 06 / 2011**
Transaction ID : 3123169
Amount of Each Receipt this Period **10.00**
Tammy Duckworth Earmarked Contributions

SUBTOTAL of Receipts This Page (optional)..... **110.00**
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 1073 OF 2452 |
| | <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. Viviana Sanchez
Full Name (Last, First, Middle Initial)
Mailing Address 1119 19 th street

| | | |
|--------------------|-------------|-------------------|
| City Bellingham | State WA | Zip Code 98225 |
|--------------------|-------------|-------------------|

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

| | |
|---|-----------------------------|
| Name of Employer St. Joseph Hospital | Occupation Social Worker |
|---|-----------------------------|

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 |
| 12 | / | 13 | / | 2011 |

Transaction ID : 3127132

Amount of Each Receipt this Period
0.00

Tammy Duckworth Earmarked Contributions

B. Ms. Anne Campbell
Full Name (Last, First, Middle Initial)
Mailing Address 1210 Spruce Street

| | | |
|----------------------|-------------|-------------------|
| City Philadelphia | State PA | Zip Code 19107 |
|----------------------|-------------|-------------------|

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

| | |
|-----------------------------|-----------------------|
| Name of Employer U of PA | Occupation analyst |
|-----------------------------|-----------------------|

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 |
| 12 | / | 12 | / | 2011 |

Transaction ID : 3127109

Amount of Each Receipt this Period
150.00

Tammy Duckworth Earmarked Contributions

C. Ms. Martha Stampfer
Full Name (Last, First, Middle Initial)
Mailing Address 7290 Sayre Drive

| | | |
|-----------------|-------------|-------------------|
| City Oakland | State CA | Zip Code 94611 |
|-----------------|-------------|-------------------|

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

| | |
|-----------------------------------|-------------------------|
| Name of Employer U. California | Occupation biologist |
|-----------------------------------|-------------------------|

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 |
| 12 | / | 09 | / | 2011 |

Transaction ID : 3126581

Amount of Each Receipt this Period
20.00

Tammy Duckworth Earmarked Contributions

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 175.00 |
| 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 1074 OF 2452 |
| | <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. Martha Stampfer
 Full Name (Last, First, Middle Initial)
 Mailing Address 7290 Sayre Drive
 City Oakland State CA Zip Code 94611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer U. California Occupation biologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 09 / 2011
Transaction ID : 3126584
 Amount of Each Receipt this Period 20.00
 Tammy Duckworth Earmarked Contributions

B. Mary Louise Sejda
 Full Name (Last, First, Middle Initial)
 Mailing Address 6228 Forest Ave.
 City Hammond State IN Zip Code 46324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UNIV OF CHICAGO HOSPITALS Occupation ASST DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 09 / 2011
Transaction ID : 3126600
 Amount of Each Receipt this Period 20.00
 Tammy Duckworth Earmarked Contributions

C. Mr. Robert H. Schor
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Ambassador Drive
 City Rochester State NY Zip Code 14610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Pittsburgh Occupation Faculty
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 12 / 20 / 2011
Transaction ID : 3132573
 Amount of Each Receipt this Period 166.67
 Tammy Duckworth Earmarked Contributions

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 206.67 |
| TOTAL This Period (last page this line 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 1075 OF 2452 |
| | <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. James Crawford | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2011 |
| Mailing Address 5760 Citrus Ave | | Transaction ID : 3120180 |
| City Whittier | State CA | Zip Code 90601 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 20.00 | |
| Name of Employer n/a | Occupation Retired | Val Demings Earmarks |
| 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. Ms. Phyllis Gardner | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 02 / 2011 |
| Mailing Address 406 Tennessee Glen Way | | Transaction ID : 3120255 |
| City Mill Valley | State CA | Zip Code 94941 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 10.00 | |
| Name of Employer n/a | Occupation retired | Val Demings Earmarks |
| 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. Ms. Joan Hubbell | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 05 / 2011 |
| Mailing Address 509 Aurora Ave Unit 420 | | Transaction ID : 3123081 |
| City Naperville | State IL | Zip Code 60540 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 20.00 | |
| Name of Employer n/a | Occupation Retired | Val Demings Earmarks |
| 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).....▶ | 50.00 |
| 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 1076 OF 2452 |
| | <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 Lyons
Full Name (Last, First, Middle Initial)
Mailing Address 36 Barkley Cir.
City Fort Myers State FL Zip Code 33907
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 **0.00**

Date of Receipt **12 / 05 / 2011**
Transaction ID : 3123098
Amount of Each Receipt this Period **20.00**
Val Demings Earmarks

B. Ms. Beverlee Mitchell
Full Name (Last, First, Middle Initial)
Mailing Address 3012 West Hollywood Avenue
City Chicago State IL Zip Code 60659
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 **0.00**

Date of Receipt **12 / 06 / 2011**
Transaction ID : 3123173
Amount of Each Receipt this Period **100.00**
Val Demings Earmarks

C. Ms. Joyce O. Newcomb
Full Name (Last, First, Middle Initial)
Mailing Address 5355 Pooks Hill Rd.
City Bethesda State MD Zip Code 20814
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 **0.00**

Date of Receipt **12 / 07 / 2011**
Transaction ID : 3123423
Amount of Each Receipt this Period **20.00**
Val Demings Earmarks

SUBTOTAL of Receipts This Page (optional)..... **140.00**
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 1077 OF 2452 |
| | (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. Mr. Jesse Perry | | Date of Receipt 12 / 07 / 2011 Transaction ID : 3123486 |
| Mailing Address 3748 Oakes Drive | | Amount of Each Receipt this Period 15.00 |
| City Hayward | State CA | Zip Code 94542 |
| FEC ID number of contributing federal political committee. C | Val Demings Earmarks | |
| Name of Employer n/a | Occupation retired | |
| 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. Ms. Susan P. Nye | | Date of Receipt 12 / 07 / 2011 Transaction ID : 3123492 |
| Mailing Address 671 Roxborough Avenue | | Amount of Each Receipt this Period 8.33 |
| City Philadelphia | State PA | Zip Code 19128 |
| FEC ID number of contributing federal political committee. C | Val Demings Earmarks | |
| Name of Employer n/a | Occupation Retired | |
| 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. Mrs. Ruth Giese | | Date of Receipt 12 / 08 / 2011 Transaction ID : 3125003 |
| Mailing Address 12 Asbury Avenue | | Amount of Each Receipt this Period 25.00 |
| City Binghamton | State NY | Zip Code 13901 |
| FEC ID number of contributing federal political committee. C | Val Demings Earmarks | |
| Name of Employer n/a | Occupation RETIRED | |
| 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).....▶ | 48.33 |
| TOTAL This Period (last page this line 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 1078 OF 2452 |
| | <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. Mary Jefferson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5235 E Fern Haven Ln.
 City Anaheim State CA Zip Code 92807
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125015
 Amount of Each Receipt this Period
 20.00
 Val Demings Earmarks

B. Ms. Donna E. Willoughby
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 Lake Creek Rd.
 City Salmon State ID Zip Code 83467
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125046
 Amount of Each Receipt this Period
 50.00
 Val Demings Earmarks

C. Ms. Christina D. Baker
 Full Name (Last, First, Middle Initial)
 Mailing Address 1150 Willow Glen Way
 City San Jose State CA Zip Code 95125
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125058
 Amount of Each Receipt this Period
 50.00
 Val Demings Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 120.00 |
| 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 1079 OF 2452 |
| | <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. Mr. Paul Lerman
Full Name (Last, First, Middle Initial)
Mailing Address 413 W Englewood Ave
City Teaneck State NJ Zip Code 07666
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 **0.00**

Date of Receipt **12 / 08 / 2011**
Transaction ID : 3125062
Amount of Each Receipt this Period **100.00**
Val Demings Earmarks

B. Ms. Elizabeth Hale
Full Name (Last, First, Middle Initial)
Mailing Address 9529 SW 196th Avenue Rd
City Dunnellon State FL Zip Code 34432
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 **0.00**

Date of Receipt **12 / 09 / 2011**
Transaction ID : 3126562
Amount of Each Receipt this Period **50.00**
Val Demings Earmarks

C. Ms. Gail Silverstone
Full Name (Last, First, Middle Initial)
Mailing Address 6633 32 Place, NW 32nd Place, NW
City Washington, State DC Zip Code 20015
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 **0.00**

Date of Receipt **12 / 09 / 2011**
Transaction ID : 3126623
Amount of Each Receipt this Period **33.33**
Val Demings Earmarks

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 183.33 |
| TOTAL This Period (last page this line 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 1080 OF 2452 |
| | <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. B. Kay Kinnear
Full Name (Last, First, Middle Initial)
Mailing Address 621B Idlewild Circle

| | | |
|--------------------|-------------|-------------------|
| City Birmingham | State AL | Zip Code 35205 |
|--------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 12 | / | 2011 |

Transaction ID : 3126832

Amount of Each Receipt this Period

| |
|--------|
| 100.00 |
|--------|

Val Demings Earmarks

B. Mrs. Emily Rauh Pulitzer
Full Name (Last, First, Middle Initial)
Mailing Address 4903 Pershing Pl.

| | | |
|---------------------|-------------|-------------------|
| City Saint Louis | State MO | Zip Code 63108 |
|---------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 12 | / | 2011 |

Transaction ID : 3127082

Amount of Each Receipt this Period

| |
|--------|
| 250.00 |
|--------|

Val Demings Earmarks

C. Mrs. Jane D. Ortel
Full Name (Last, First, Middle Initial)
Mailing Address 66 Silver Lake Ave.

| | | |
|-------------------|-------------|-------------------|
| City Wakefield | State RI | Zip Code 02879 |
|-------------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 13 | / | 2011 |

Transaction ID : 3127125

Amount of Each Receipt this Period

| |
|--------|
| 100.00 |
|--------|

Val Demings Earmarks

| | |
|--|--------|
| 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 1081 OF 2452 |
| | <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. Rosemarie Sheperd
Full Name (Last, First, Middle Initial)
Mailing Address 2 West 3rd Ave.
City Johnstown State NY Zip Code 12095
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 **0.00**

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129888
Amount of Each Receipt this Period **50.00**
Val Demings Earmarks

B. Mrs. Peg French
Full Name (Last, First, Middle Initial)
Mailing Address 544 Kemmerer Road
City State College State PA Zip Code 16801
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 **0.00**

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129903
Amount of Each Receipt this Period **25.00**
Val Demings Earmarks

C. Mrs. Gloria M. Gray
Full Name (Last, First, Middle Initial)
Mailing Address 436 Crestover Circle
City Richardson State TX Zip Code 75080
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 **0.00**

Date of Receipt
12 / 15 / 2011
Transaction ID : 3129916
Amount of Each Receipt this Period **20.00**
Val Demings Earmarks

SUBTOTAL of Receipts This Page (optional)..... **95.00**
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 1082 OF 2452 |
| | (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. Sydney Story

Mailing Address 205 E Terrace Ave

City State Zip Code
Fresno CA 93704

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 ▼
0.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011
Transaction ID : 3131742

Amount of Each Receipt this Period
0.00

Val Demings Earmarks

Full Name (Last, First, Middle Initial)
B. Mr. Fred Martin

Mailing Address 55 Holmes Ranch Rd
PO Box 328

City State Zip Code
Philo CA 95466

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 ▼
0.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011
Transaction ID : 3131793

Amount of Each Receipt this Period
20.00

Val Demings Earmarks

Full Name (Last, First, Middle Initial)
C. Mr. Bernard Shyffer

Mailing Address 4212 Palos Verdes Drive E

City State Zip Code
Rancho Pls. Vrd. CA 90275

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 ▼
0.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2011
Transaction ID : 3132542

Amount of Each Receipt this Period
100.00

Val Demings Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00

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 1083 OF 2452 |
| | <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. Merle D. Borchers
Full Name (Last, First, Middle Initial)

Mailing Address 2346 78th Street E

City Inver Grove State MN Zip Code 55076

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011

Transaction ID : 3139536

Amount of Each Receipt this Period 6.66

Val Demings Earmarks

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

Mailing Address 1337 Derby St

City Berkeley State CA Zip Code 94702

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

Name of Employer Alameda Hospital Occupation RN

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
 12 / 27 / 2011

Transaction ID : 3139515

Amount of Each Receipt this Period 8.33

Val Demings Earmarks

C. Ms. Marybeth Webster
Full Name (Last, First, Middle Initial)

Mailing Address 2916 E Loma Alta DR

City Douglas State AZ Zip Code 85607

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

Name of Employer chircauhua com health ctr Occupation ART TERAPIS

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
 12 / 06 / 2011

Transaction ID : 3123160

Amount of Each Receipt this Period 50.00

Val Demings Earmarks

SUBTOTAL of Receipts This Page (optional).....▶ 64.99

TOTAL This Period (last page this line 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 1084 OF 2452 |
| | <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. Judi Fishman
 Full Name (Last, First, Middle Initial)
 Mailing Address 923 W Webster Ave
 City Chicago State IL Zip Code 60614
 Date of Receipt 12 / 27 / 2011
Transaction ID : 3139528
 Amount of Each Receipt this Period 25.00
 Val Demings Earmarks
 Name of Employer Occupation REAL ESTATE EXEC
 Federal Street Holdings
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 0.00
 FEC ID number of contributing federal political committee. C

B. Ms. Gerrie Barclay
 Full Name (Last, First, Middle Initial)
 Mailing Address 32241 Southfield Road
 City Birmingham State MI Zip Code 48025
 Date of Receipt 12 / 01 / 2011
Transaction ID : 3120213
 Amount of Each Receipt this Period 50.00
 Val Demings Earmarks
 Name of Employer Occupation Bilingual Coordinator
 Fitz Public Schls
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 0.00
 FEC ID number of contributing federal political committee. C

C. Ms. Margaret Jean J. Cannon
 Full Name (Last, First, Middle Initial)
 Mailing Address 548b Beach Road
 City Sarasota State FL Zip Code 34242
 Date of Receipt 12 / 01 / 2011
Transaction ID : 3120152
 Amount of Each Receipt this Period 15.00
 Val Demings Earmarks
 Name of Employer Occupation Project Manager
 IBM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 0.00
 FEC ID number of contributing federal political committee. C

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 1085 OF 2452 |
| | (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. Mrs. Marianita Meyer | | Date of Receipt 12 / 27 / 2011 Transaction ID : 3139503 |
| Mailing Address 425 Park Ave. South Apt. 18C | | Amount of Each Receipt this Period 33.34 |
| City New York | State NY | Zip Code 10016 |
| FEC ID number of contributing federal political committee. C | | Val Demings Earmarks |
| Name of Employer Kreindler & Kreindler | Occupation Legal Assistant | |
| 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. Sergei Kouznetsov | | Date of Receipt 12 / 02 / 2011 Transaction ID : 3120280 |
| Mailing Address 6757 Vermar Ter | | Amount of Each Receipt this Period 10.00 |
| City Eden Prairie | State MN | Zip Code 55346 |
| FEC ID number of contributing federal political committee. C | | Val Demings Earmarks |
| Name of Employer maverick tech | Occupation engineer | |
| 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. Ms. Alice A. Kleinhans | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3122992 |
| Mailing Address 45 North St. | | Amount of Each Receipt this Period 100.00 |
| City Andover | State MA | Zip Code 01810 |
| FEC ID number of contributing federal political committee. C | | Val Demings Earmarks |
| Name of Employer Merrimack Valley | Occupation Lawyer | |
| 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).....▶ | 143.34 |
| TOTAL This Period (last page this line 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 1086 OF 2452 |
| | <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. Leslie H. Pierpont
Full Name (Last, First, Middle Initial)
Mailing Address 4157 ortega blvd

| | | |
|----------------------|-------------|-------------------|
| City Jacksonville | State FL | Zip Code 32210 |
|----------------------|-------------|-------------------|

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

| | |
|--|-------------------------|
| Name of Employer Native and Uncommon Plants | Occupation Requested |
|--|-------------------------|

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 |
| 12 | / | 14 | / | 2011 |

Transaction ID : 3127254

Amount of Each Receipt this Period

| |
|-------|
| 10.00 |
|-------|

Val Demings Earmarks

B. Ms. Frances Y. Smith
Full Name (Last, First, Middle Initial)
Mailing Address 30667 Mystic Forest Drive

| | | |
|-------------------------|-------------|-------------------|
| City Farmington Hill | State MI | Zip Code 48331 |
|-------------------------|-------------|-------------------|

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

| | |
|---|-----------------------|
| Name of Employer Oakland Comm. College | Occupation Teacher |
|---|-----------------------|

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 |
| 12 | / | 08 | / | 2011 |

Transaction ID : 3125009

Amount of Each Receipt this Period

| |
|-------|
| 16.66 |
|-------|

Val Demings Earmarks

C. Ms. Ruth Fredericks
Full Name (Last, First, Middle Initial)
Mailing Address 3 Peter Cooper Rd
Apt. 14E

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10010 |
|------------------|-------------|-------------------|

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 ▼ **0.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : 3120071

Amount of Each Receipt this Period

| |
|-------|
| 10.00 |
|-------|

Val Demings Earmarks

| | |
|--|--------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 36.66 |
| 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 1087 OF 2452 |
| | <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. Marcia Roseman
Full Name (Last, First, Middle Initial)
Mailing Address 6318 Warrens Way

| | | |
|-----------------|-------------|-------------------|
| City Wanaque | State NJ | Zip Code 07465 |
|-----------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : 3120170

Amount of Each Receipt this Period
0.00

Val Demings Earmarks

B. Eleanor Robison
Full Name (Last, First, Middle Initial)
Mailing Address 2321 Black Oak Way

| | | |
|-----------------|-------------|-------------------|
| 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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : 3120174

Amount of Each Receipt this Period
5.00

Val Demings Earmarks

C. Ms. Ellen Doyno
Full Name (Last, First, Middle Initial)
Mailing Address 80 Meadowbrook Rd

| | | |
|-----------------|-------------|-------------------|
| City Buffalo | State NY | Zip Code 14221 |
|-----------------|-------------|-------------------|

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 ▼
0.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : 3120184

Amount of Each Receipt this Period
25.00

Val Demings Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 50.00 |
| 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 1089 OF 2452 |
| | <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. Mr. Peter Lemkin
 Full Name (Last, First, Middle Initial)
 Mailing Address 14825 Keeneland Circle
 City North Potomac State MD Zip Code 20878
 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 ▼ 0.00

Date of Receipt
 12 / 01 / 2011
Transaction ID : 3120219
 Amount of Each Receipt this Period 5.00
 Val Demings Earmarks

B. Ms. Lyda Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 6814 S Dennis Dr.
 City Tempe State AZ Zip Code 85283
 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 ▼ 0.00

Date of Receipt
 12 / 02 / 2011
Transaction ID : 3120233
 Amount of Each Receipt this Period 25.00
 Val Demings Earmarks

C. Mr. William Kornfeld
 Full Name (Last, First, Middle Initial)
 Mailing Address 1304 Bobbi Ct.
 City Bowling Green State KY Zip Code 42103
 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 ▼ 0.00

Date of Receipt
 12 / 02 / 2011
Transaction ID : 3120237
 Amount of Each Receipt this Period 33.33
 Val Demings Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 63.33 |
| TOTAL This Period (last page this line 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 1090 OF 2452 |
| | <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. Carlyn Halde
Full Name (Last, First, Middle Initial)
Mailing Address 63 Park Hill Ave.
City San Francisco State CA Zip Code 94117
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 0.00

Date of Receipt
12 / 02 / 2011
Transaction ID : 3120243
Amount of Each Receipt this Period 50.00
Val Demings Earmarks

B. Ms. N. Laura Middleton M.D.
Full Name (Last, First, Middle Initial)
Mailing Address 8 Windridge Rd.
City Essex Junction State VT Zip Code 05452
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 0.00

Date of Receipt
12 / 02 / 2011
Transaction ID : 3120249
Amount of Each Receipt this Period 83.33
Val Demings Earmarks

C. Mr. Ken Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 965 Kelly Blvd
City Springfield State OR Zip Code 97477
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 0.00

Date of Receipt
12 / 02 / 2011
Transaction ID : 3120261
Amount of Each Receipt this Period 10.00
Val Demings Earmarks

SUBTOTAL of Receipts This Page (optional)..... **143.33**
TOTAL This Period (last page this line 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 1091 OF 2452 |
| | <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. Isabel Labriola
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 10794

| | | |
|---|----------------------------------|-------------------|
| City Zephyr Cove | State NV | Zip Code 89448 |
| 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 ▼ 0.00 | |

Date of Receipt
12 / 02 / 2011
Transaction ID : 3120270

Amount of Each Receipt this Period
20.00

Val Demings Earmarks

B. Ms. Harriette C. Buchanan
Full Name (Last, First, Middle Initial)
Mailing Address 194 Eastview Dr.

| | | |
|---|----------------------------------|-------------------|
| City Boone | State NC | Zip Code 28607 |
| 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 ▼ 0.00 | |

Date of Receipt
12 / 05 / 2011
Transaction ID : 3122998

Amount of Each Receipt this Period
20.00

Val Demings Earmarks

C. Ms. Judith Wilcox
Full Name (Last, First, Middle Initial)
Mailing Address 26988 Heatherford Dr., Apt. 3

| | | |
|---|----------------------------------|-------------------|
| City Perrysburg | State OH | Zip Code 43551 |
| 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 ▼ 0.00 | |

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123004

Amount of Each Receipt this Period
6.66

Val Demings Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 46.66 |
| 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 1092 OF 2452 |
| | <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. Patricia S. Byard
Full Name (Last, First, Middle Initial)
Mailing Address 3615 Maidu Pl.
City Davis State CA Zip Code 95618
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 0.00

Date of Receipt 12 / 05 / 2011
Transaction ID : 3123010
Amount of Each Receipt this Period 100.00
Val Demings Earmarks

B. Ms. Muriel I. Patterson
Full Name (Last, First, Middle Initial)
Mailing Address 900 Hill Street
City Broomfield State CO Zip Code 80023
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 0.00

Date of Receipt 12 / 05 / 2011
Transaction ID : 3123016
Amount of Each Receipt this Period 10.00
Val Demings Earmarks

C. Mr. Michael Burt
Full Name (Last, First, Middle Initial)
Mailing Address 505 13th St. SE, Apt. 1
City Washington State DC Zip Code 20003
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 0.00

Date of Receipt 12 / 05 / 2011
Transaction ID : 3123022
Amount of Each Receipt this Period 100.00
Val Demings Earmarks

SUBTOTAL of Receipts This Page (optional)..... **210.00**
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 1093 OF 2452 |
| | (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

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. M. J. McAdam | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123028 |
| Mailing Address 710 Bird Bay Dr W | | Amount of Each Receipt this Period 20.00 |
| City Venice | State FL | Zip Code 34285 |
| FEC ID number of contributing federal political committee. C | | Val Demings Earmarks |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Barbara House | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123040 |
| Mailing Address 699 Lost River Road | | Amount of Each Receipt this Period 20.00 |
| City Mazama | State WA | Zip Code 98833 |
| FEC ID number of contributing federal political committee. C | | Val Demings Earmarks |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Yvette L. Gunn | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123048 |
| Mailing Address 2328 Oakview Rd NE | | Amount of Each Receipt this Period 10.00 |
| City Atlanta | State GA | Zip Code 30317 |
| FEC ID number of contributing federal political committee. C | | Val Demings Earmarks |
| 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 ▼ 0.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 50.00 |
| 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 1094 OF 2452 |
| | <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. John W. Bakhuls | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123059 |
| Mailing Address 6 Scottsdale Way # 1 | | Amount of Each Receipt this Period 10.00 |
| City Novato | State CA | Zip Code 94947 |
| FEC ID number of contributing federal political committee. C | | Val Demings Earmarks |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Eva Kelley | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123065 |
| Mailing Address 760 N 2nd St., Apt. 18 | | Amount of Each Receipt this Period 2.00 |
| City Paragould | State AR | Zip Code 72450 |
| FEC ID number of contributing federal political committee. C | | Val Demings Earmarks |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Mr. William Guthrie | | Date of Receipt 12 / 05 / 2011 Transaction ID : 3123071 |
| Mailing Address 301 Aden Ct. | | Amount of Each Receipt this Period 4.16 |
| City Upper Marlboro | State MD | Zip Code 20774 |
| FEC ID number of contributing federal political committee. C | | Val Demings Earmarks |
| 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 ▼ 0.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 16.16 |
| TOTAL This Period (last page this line 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 1095 OF 2452 |
| | <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. Pat Sibley
Full Name (Last, First, Middle Initial)

Mailing Address 118 SW 116th Street
Apt. D24

City Seattle State WA Zip Code 98146

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 ▼ 0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123092

Amount of Each Receipt this Period 2.00

Val Demings Earmarks

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

Mailing Address 21415 33rd Ave.

City Bayside State NY Zip Code 11361

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 ▼ 0.00

Date of Receipt
12 / 06 / 2011
Transaction ID : 3123136

Amount of Each Receipt this Period 10.00

Val Demings Earmarks

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

Mailing Address 1704 Shadford Rd.

City Ann Arbor State MI Zip Code 48104

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 ▼ 0.00

Date of Receipt
12 / 06 / 2011
Transaction ID : 3123144

Amount of Each Receipt this Period 25.00

Val Demings Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 37.00

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 1096 OF 2452 |
| | <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

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Mr. Curtis J. Eaton | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 06 / 2011 |
| Mailing Address 622 Hall Blvd | | Transaction ID : 3123152 |
| City Mason | State MI | Zip Code 48854 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 20.00 |
| Name of Employer REQUESTED | Occupation REQUESTED | Val Demings Earmarks |
| 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. Mr. Rowland Bell | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2011 |
| Mailing Address 606 Fords Landing Way | | Transaction ID : 3123417 |
| City Alexandria | State VA | Zip Code 22314 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200.00 |
| Name of Employer REQUESTED | Occupation REQUESTED | Val Demings Earmarks |
| 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. Mrs. Katherine Horowitz | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 07 / 2011 |
| Mailing Address 2173 Glenkirk Drive | | Transaction ID : 3123429 |
| City San Jose | State CA | Zip Code 95124 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 20.00 |
| Name of Employer REQUESTED | Occupation REQUESTED | Val Demings Earmarks |
| 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).....▶ | 240.00 |
| 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 1097 OF 2452 |
| | <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. Minette Hoffheimer
Full Name (Last, First, Middle Initial)

Mailing Address 1201 Edgecliff Pl., Apt. 1021
Apt. 1021

City Cincinnati State OH Zip Code 45206

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 ▼ 0.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123456

Amount of Each Receipt this Period
100.00

Val Demings Earmarks

B. Ms. Betty Armstrong
Full Name (Last, First, Middle Initial)

Mailing Address 16221 SE 29th St

City Bellevue State WA Zip Code 98008

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 ▼ 0.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123460

Amount of Each Receipt this Period
16.66

Val Demings Earmarks

C. Ms. Verna Robinson
Full Name (Last, First, Middle Initial)

Mailing Address 1737 Varnum Street NW

City Washington State DC Zip Code 20011

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 ▼ 0.00

Date of Receipt
12 / 07 / 2011
Transaction ID : 3123463

Amount of Each Receipt this Period
12.50

Val Demings Earmarks

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 129.16 |
| TOTAL This Period (last page this line 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 1098 OF 2452 |
| | <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. Robert E. Laveine

Mailing Address PO Box 412

City West Burlington State IA Zip Code 52655

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : 3123470

Amount of Each Receipt this Period
 100.00

Val Demings Earmarks

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

Mailing Address 1140 5th Avenue

City New York State NY Zip Code 10128

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : 3123476

Amount of Each Receipt this Period
 100.00

Val Demings Earmarks

Full Name (Last, First, Middle Initial)
C. Ms. Betty L. Jucevic

Mailing Address 648 24th Place

City Hermosa Beach State CA Zip Code 90254

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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 08 / 2011
Transaction ID : 3125022

Amount of Each Receipt this Period
 20.00

Val Demings Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00

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 1099 OF 2452 |
| | (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. Elsie Murray
Full Name (Last, First, Middle Initial)

Mailing Address 1429 Beulah Rd

City Pittsburgh State PA Zip Code 15235

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 ▼ 0.00

Date of Receipt
 12 / 08 / 2011
Transaction ID : 3125032

Amount of Each Receipt this Period
 25.00

Val Demings Earmarks

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

Mailing Address 514 Chatham Rd

City Columbus State OH Zip Code 43214

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 ▼ 0.00

Date of Receipt
 12 / 08 / 2011
Transaction ID : 3125038

Amount of Each Receipt this Period
 15.00

Val Demings Earmarks

C. Catheine O'Connor
Full Name (Last, First, Middle Initial)

Mailing Address 429 Josiah Bartlett Rd.

City Concord State NH Zip Code 03301

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 ▼ 0.00

Date of Receipt
 12 / 08 / 2011
Transaction ID : 3125052

Amount of Each Receipt this Period
 3.33

Val Demings Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 43.33

TOTAL This Period (last page this line 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 1100 OF 2452 |
| | <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. Carl Duzen | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 08 / 2011 |
| Mailing Address 520 Kathmere Road | | Transaction ID : 3125070 |
| City Havertown | State PA | Zip Code 19083 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50.00 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Val Demings Earmarks |
| 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. Ms. Joan Kowalski | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 |
| Mailing Address 54275 Bradshaw DR | | Transaction ID : 3126567 |
| City New Baltimore | State MI | Zip Code 48047 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 8.33 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Val Demings Earmarks |
| 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. Ms. Carole C. Allen | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011 |
| Mailing Address 180 Montana Drive | | Transaction ID : 3126573 |
| City Danville | State CA | Zip Code 94526 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 2.50 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Val Demings Earmarks |
| 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).....▶ | 60.83 |
| TOTAL This Period (last page this line 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 1101 OF 2452 |
| | <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. Betty S. Tunstall
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1091

City Black Canyon City State AZ Zip Code 85324

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 ▼ 0.00

Date of Receipt
12 / 09 / 2011
Transaction ID : 3126592

Amount of Each Receipt this Period 10.00

Val Demings Earmarks

B. Ms. Laura Steele
Full Name (Last, First, Middle Initial)

Mailing Address 10509 Hutting Pl.

City Silver Spring State MD Zip Code 20902

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 ▼ 0.00

Date of Receipt
12 / 09 / 2011
Transaction ID : 3126611

Amount of Each Receipt this Period 20.00

Val Demings Earmarks

C. Ms. Dorothea R. Crisp
Full Name (Last, First, Middle Initial)

Mailing Address 1245 SW Walking Wood

City Depoe Bay State OR Zip Code 97341

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 ▼ 0.00

Date of Receipt
12 / 09 / 2011
Transaction ID : 3126617

Amount of Each Receipt this Period 20.00

Val Demings Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 50.00 |
| 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 1102 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Bernardo Hollman | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2011 |
| Mailing Address 10237 Autumnview Ln | | Transaction ID : 3127089 |
| City San Diego | State CA | Zip Code 92126 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 2.00 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Val Demings Earmarks |
| 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. Ms. Susan Dennehy | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2011 |
| Mailing Address 240 Central Park S. | | Transaction ID : 3127101 |
| City New York | State NY | Zip Code 10019 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 12.50 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Val Demings Earmarks |
| 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. Mr. Peter Henning | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 13 / 2011 |
| Mailing Address 8485 Hunts Point Ln | | Transaction ID : 3127136 |
| City Hunts Point | State WA | Zip Code 98004 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 10.00 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Val Demings Earmarks |
| 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).....▶ | 24.50 |
| TOTAL This Period (last page this line 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 1103 OF 2452
(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. Carolyn Thomas
 Mailing Address 7409 Flower Ave.
 City State Zip Code
 Takoma Park MD 20912
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2011
Transaction ID : 3127270
 Amount of Each Receipt this Period
 25.00
 Val Demings Earmarks

Full Name (Last, First, Middle Initial)
B. Ms. Carol Cooper
 Mailing Address 58 Grandview Ave.
 City State Zip Code
 Kingston NY 12401
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129894
 Amount of Each Receipt this Period
 10.00
 Val Demings Earmarks

Full Name (Last, First, Middle Initial)
C. Ms. Nancy Richards
 Mailing Address 5207 Church Drive
 City State Zip Code
 Charleston WV 25306
 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 ▼
 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011
Transaction ID : 3129908
 Amount of Each Receipt this Period
 20.00
 Val Demings Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 1104 OF 2452
(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. Ken Blanning
 Full Name (Last, First, Middle Initial)
 Mailing Address 4510 Katie Ln
 City Orlando State FL Zip Code 32806
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 16 / 2011
Transaction ID : 3131718
 Amount of Each Receipt this Period
 10.00
 Val Demings Earmarks

B. Ms. Charlotte Alexandre
 Full Name (Last, First, Middle Initial)
 Mailing Address 10345 Adams Pl
 City Thornton State CO Zip Code 80229
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131728
 Amount of Each Receipt this Period
 10.00
 Val Demings Earmarks

C. Mr. Frederick Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 1939 Jefferson St., Apt. 101
 City Hollywood State FL Zip Code 33020
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : 3131741
 Amount of Each Receipt this Period
 2.50
 Val Demings Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 22.50
TOTAL This Period (last page this line 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 1105 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Mithlesh Prakash | | Date of Receipt 12 / 19 / 2011 Transaction ID : 3131756 |
| Mailing Address 2665 Condor Cir | | Amount of Each Receipt this Period 8.50 |
| City Corona | State CA | Zip Code 92882 |
| FEC ID number of contributing federal political committee. C | | Val Demings Earmarks |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Louise Weschler | | Date of Receipt 12 / 19 / 2011 Transaction ID : 3131781 |
| Mailing Address 161 Richdale Rd | | Amount of Each Receipt this Period 25.00 |
| City Colts Neck | State NJ | Zip Code 07722 |
| FEC ID number of contributing federal political committee. C | | Val Demings Earmarks |
| 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 ▼ 0.00 | |

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Ellen M. Tirone | | Date of Receipt 12 / 19 / 2011 Transaction ID : 3131787 |
| Mailing Address 12 Edendale Ln | | Amount of Each Receipt this Period 10.00 |
| City Durham | State NH | Zip Code 03824 |
| FEC ID number of contributing federal political committee. C | | Val Demings Earmarks |
| 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 ▼ 0.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 43.50 |
| TOTAL This Period (last page this line 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 1106 OF 2452 |
| | (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. Charlotte Stone
Full Name (Last, First, Middle Initial)
Mailing Address 2428 Sandell Dr
City Atlanta State GA Zip Code 30338
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 ▼ 0.00

Date of Receipt
12 / 19 / 2011
Transaction ID : 3132272
Amount of Each Receipt this Period 25.00
Val Demings Earmarks

B. Carl Weinberg
Full Name (Last, First, Middle Initial)
Mailing Address 42 Green Oaks Ct.
City Walnut Creek State CA Zip Code 94596
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 ▼ 0.00

Date of Receipt
12 / 20 / 2011
Transaction ID : 3132549
Amount of Each Receipt this Period 20.00
Val Demings Earmarks

C. Ms. Judy Hunter
Full Name (Last, First, Middle Initial)
Mailing Address 3586 Indigo Pond Dr
City Palm Harbor State FL Zip Code 34685
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 ▼ 0.00

Date of Receipt
12 / 20 / 2011
Transaction ID : 3132556
Amount of Each Receipt this Period 1.67
Val Demings Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 46.67
TOTAL This Period (last page this line 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 1107 OF 2452 |
| | <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. Clair A. Sharpless
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Drumlin Rd.
 City West Simsbury State CT Zip Code 6092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation Homemaker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt
 12 / 20 / 2011
Transaction ID : 3132575
 Amount of Each Receipt this Period
 100.00
 Val Demings Earmarks

B. Ms. Nancy Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 245 N Vine St Apt 903
 City Salt Lake City State UT Zip Code 84103
 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 **0.00**

Date of Receipt
 12 / 21 / 2011
Transaction ID : 3133751
 Amount of Each Receipt this Period
 10.00
 Val Demings Earmarks

C. Mrs. Marian Ryan
 Full Name (Last, First, Middle Initial)
 Mailing Address 2460 Linette Ct
 City Yorktown Heights State NY Zip Code 10598
 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 **0.00**

Date of Receipt
 12 / 22 / 2011
Transaction ID : 3133768
 Amount of Each Receipt this Period
 20.00
 Val Demings Earmarks

SUBTOTAL of Receipts This Page (optional)..... **130.00**
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 1108 OF 2452
(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. Natalie Grigg
 Full Name (Last, First, Middle Initial)
 Mailing Address 92 Lakeshore Road
 City Boxford State MA Zip Code 01921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer REQUESTED Occupation Housewife/farmer
 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
 12 / 27 / 2011
Transaction ID : 3139498
 Amount of Each Receipt this Period
 100.00
 Val Demings Earmarks

B. Ms. Patricia Froman
 Full Name (Last, First, Middle Initial)
 Mailing Address 214 Parliament Dr.
 City Coraopolis State PA Zip Code 15108
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3139520
 Amount of Each Receipt this Period
 20.00
 Val Demings Earmarks

C. Ms. Mary Niccolls
 Full Name (Last, First, Middle Initial)
 Mailing Address 1830 Garden Dr.
 City Medford State OR Zip Code 97504
 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 ▼ 0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2011
Transaction ID : 3139540
 Amount of Each Receipt this Period
 40.00
 Val Demings Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 160.00
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 1109 OF 2452 |
| (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Sherri L. Burr
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 27223

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Albuquerque | NM | 87125 |

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : 3139555

Amount of Each Receipt this Period
 5.00

Val Demings Earmarks

B. Ms. Katha D. Massey
Full Name (Last, First, Middle Initial)
Mailing Address 270 Victoria Street

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Commerce | GA | 30529 |

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
| REQUESTED | Librarian |

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
 12 / 29 / 2011
Transaction ID : 3139556

Amount of Each Receipt this Period
 50.00

Val Demings Earmarks

C. Ms. Colleen B. Dipaul
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 95

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Rector | PA | 15677 |

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 ▼
0.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : 3139567

Amount of Each Receipt this Period
 15.00

Val Demings Earmarks

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 70.00 |
| 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 1110 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|----------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Nessa Peters | | Date of Receipt 12 / 14 / 2011 Transaction ID : 3127264 |
| Mailing Address 1010 cannn road | | Amount of Each Receipt this Period 20.00 |
| City silver spring | State MD | Zip Code 20904 |
| FEC ID number of contributing federal political committee. C | | Val Demings Earmarks |
| Name of Employer retired | Occupation teacher | |
| 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. Ms. Marciarose Shestack | | Date of Receipt 12 / 19 / 2011 Transaction ID : 3131775 |
| Mailing Address 2201 Pennsylvania Avenue | | Amount of Each Receipt this Period 16.67 |
| City Philadelphia | State PA | Zip Code 19130 |
| FEC ID number of contributing federal political committee. C | | Val Demings Earmarks |
| Name of Employer retired | Occupation TV anchor journalist | |
| 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. Ms. Judith Rogovin | | Date of Receipt 12 / 20 / 2011 Transaction ID : 3132561 |
| Mailing Address 4566 Forest Wood Trl | | Amount of Each Receipt this Period 0.83 |
| City Sarasota | State FL | Zip Code 34241 |
| FEC ID number of contributing federal political committee. C | | Val Demings Earmarks |
| Name of Employer Saint Paul Public Schls | Occupation Teacher | |
| 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).....▶ | 37.50 |
| TOTAL This Period (last page this line 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 1111 OF 2452 |
| | <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. Andrew Carson
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 709

City State Zip Code
Wilson WY 83014

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

Name of Employer self Occupation mtn guide

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 01 / 2011
Transaction ID : 3120162

Amount of Each Receipt this Period
10.00

Val Demings Earmarks

B. Mr. Phillip S. Berry
Full Name (Last, First, Middle Initial)

Mailing Address 4510 Canyon Road

City State Zip Code
Lafayette CA 94549

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

Name of Employer Self Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 05 / 2011
Transaction ID : 3123031

Amount of Each Receipt this Period
250.00

Val Demings Earmarks

C. Ms. Marjorie Kalins Taylor
Full Name (Last, First, Middle Initial)

Mailing Address 140 Riverside Dr.

City State Zip Code
New York NY 10024

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

Name of Employer self Occupation cionsultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt
12 / 12 / 2011
Transaction ID : 3127096

Amount of Each Receipt this Period
60.00

Val Demings Earmarks

SUBTOTAL of Receipts This Page (optional)..... ▶ 320.00

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 1112 OF 2452 |
| | <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. Clairan Ferrono
 Full Name (Last, First, Middle Initial)
 Mailing Address 5432 S Dorchester Ave.
 City Chicago State IL Zip Code 60615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 27 / 2011**
Transaction ID : 3139547
 Amount of Each Receipt this Period **50.00**
 Val Demings Earmarks

B. Mr. Richard R. Gray
 Full Name (Last, First, Middle Initial)
 Mailing Address 131 Riverside Dr., 1-A
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 01 / 2011**
Transaction ID : 3120154
 Amount of Each Receipt this Period **50.00**
 Val Demings Earmarks

C. James Gartner
 Full Name (Last, First, Middle Initial)
 Mailing Address 78 Knapp ave apt b
 City Clifton State NJ Zip Code 07011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sika Corporation Occupation mail clerk
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0.00**

Date of Receipt **12 / 06 / 2011**
Transaction ID : 3123167
 Amount of Each Receipt this Period **10.00**
 Val Demings Earmarks

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 110.00 |
| 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 1113 OF 2452 |
| | <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. Viviana Sanchez | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 13 / 2011 |
| Mailing Address 1119 19 th street | | Transaction ID : 3127130 |
| City Bellingham | State WA | Zip Code 98225 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 0.00 |
| Name of Employer St. Joseph Hospital | Occupation Social Worker | Val Demings Earmarks |
| 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. Ms. Anne Campbell | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 12 / 2011 |
| Mailing Address 1210 Spruce Street | | Transaction ID : 3127107 |
| City Philadelphia | State PA | Zip Code 19107 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 150.00 |
| Name of Employer U of PA | Occupation analyst | Val Demings Earmarks |
| 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. Ms. Martha Stampfer | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 09 / 2011 |
| Mailing Address 7290 Sayre Drive | | Transaction ID : 3126579 |
| City Oakland | State CA | Zip Code 94611 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 20.00 |
| Name of Employer U. California | Occupation biologist | Val Demings Earmarks |
| 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).....▶ | 175.00 |
| 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 1114 OF 2452 |
| | <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. Mary Louise Sejda | | Date of Receipt 12 / 09 / 2011 Transaction ID : 3126598 |
| Mailing Address 6228 Forest Ave. | | Amount of Each Receipt this Period 20.00 |
| City Hammond | State IN | Zip Code 46324 |
| FEC ID number of contributing federal political committee. C | | Val Demings Earmarks |
| Name of Employer UNIV OF CHICAGO HOSPITALS | Occupation ASST DIRECTOR | |
| 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. Mr. Robert H. Schor | | Date of Receipt 12 / 20 / 2011 Transaction ID : 3132570 |
| Mailing Address 10 Ambassador Drive | | Amount of Each Receipt this Period 166.67 |
| City Rochester | State NY | Zip Code 14610 |
| FEC ID number of contributing federal political committee. C | | Val Demings Earmarks |
| Name of Employer University of Pittsburgh | Occupation Faculty | |
| 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. John Auyong | | Date of Receipt 07 / 03 / 2011 Transaction ID : 3021667 |
| Mailing Address 835 1/2 South Sycamore Avenue | | Amount of Each Receipt this Period 10 |
| City Los Angeles | State CA | Zip Code 90036 |
| FEC ID number of contributing federal political committee. C | | Ann Kirkpatrick Contributions |
| Name of Employer Social Security Administration | Occupation Attorney Advisor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 186.67 |
| TOTAL This Period (last page this line 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 1115 OF 2452 |
| | (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

A. Ms. Nan Guslander
Full Name (Last, First, Middle Initial)
Mailing Address 5501A Balcones Drive

| | | |
|----------------|-------------|-------------------|
| City Austin | State TX | Zip Code 78731 |
|----------------|-------------|-------------------|

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

| | |
|--------------------------|------------------------|
| Name of Employer Self | Occupation investor |
|--------------------------|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 18 | / | 2011 |

Transaction ID : 3029478

Amount of Each Receipt this Period

| |
|----|
| 50 |
|----|

Ann Kirkpatrick Contributions

[MEMO ITEM]
MEMO

B. Ms. Karen J. Keefer
Full Name (Last, First, Middle Initial)
Mailing Address 1720 Valota Road

| | | |
|----------------------|-------------|-------------------|
| City Redwood City | State CA | Zip Code 94061 |
|----------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 01 | / | 2011 |

Transaction ID : 3021762

Amount of Each Receipt this Period

| |
|----|
| 50 |
|----|

Ann Kirkpatrick Contributions

[MEMO ITEM]
MEMO

C. 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 N/A | Occupation Retired |
|-------------------------|-----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 27 | / | 2011 |

Transaction ID : 3035040

Amount of Each Receipt this Period

| |
|-----|
| 100 |
|-----|

Ann Kirkpatrick Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1116 OF 2452 |
| | <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. Katherine Lyse
Full Name (Last, First, Middle Initial)

Mailing Address 3306 NE 65th Ave

City Portland State OR Zip Code 97213

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 29 / 2011

Transaction ID : 3035779

Amount of Each Receipt this Period
50

Ann Kirkpatrick Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 835 1/2 South Sycamore Avenue

City Los Angeles State CA Zip Code 90036

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

Name of Employer Social Security Administration Occupation Attorney Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2011

Transaction ID : 3021680

Amount of Each Receipt this Period
10

Anne McLane Kuster Contributions

[MEMO ITEM]
MEMO

C. Ms. Nan Guslander
Full Name (Last, First, Middle Initial)

Mailing Address 5501A Balcones Drive

City Austin State TX Zip Code 78731

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

Name of Employer Self Occupation investor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2011

Transaction ID : 3029487

Amount of Each Receipt this Period
50

Anne McLane Kuster Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1117 OF 2452 |
| | <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 J. Keefer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1720 Valota Road
 City Redwood City State CA Zip Code 94061
 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 ▼ **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3021771
 Amount of Each Receipt this Period **50**
 Anne McLane Kuster Contributions
[MEMO ITEM]
 MEMO

B. 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 N/A Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 27 / 2011**
Transaction ID : 3035055
 Amount of Each Receipt this Period **100**
 Anne McLane Kuster Contributions
[MEMO ITEM]
 MEMO

C. John Auyong
 Full Name (Last, First, Middle Initial)
 Mailing Address 835 1/2 South Sycamore Avenue
 City Los Angeles State CA Zip Code 90036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Social Security Administration Occupation Attorney Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 03 / 2011**
Transaction ID : 3021670
 Amount of Each Receipt this Period **10**
 Christie Vilsack contributions
[MEMO ITEM]
 MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1118 OF 2452 |
| | <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. Nan Guslander
Full Name (Last, First, Middle Initial)
Mailing Address 5501A Balcones Drive
City Austin State TX Zip Code 78731
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation investor
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0**

Date of Receipt **07 / 18 / 2011**
Transaction ID : 3029481
Amount of Each Receipt this Period **50**
Christie Vilsack contributions
[MEMO ITEM]
MEMO

B. Ms. Carolyn S Levin
Full Name (Last, First, Middle Initial)
Mailing Address 180 E. Pearson St. # 5107
City Chicago State IL Zip Code 60611
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation N/A
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0**

Date of Receipt **07 / 15 / 2011**
Transaction ID : 3029269
Amount of Each Receipt this Period **250**
Christie Vilsack contributions
[MEMO ITEM]
MEMO

C. John Jevitts
Full Name (Last, First, Middle Initial)
Mailing Address 97 North Main Street
City West Hartford State CT Zip Code 06107
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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3021710
Amount of Each Receipt this Period **5**
Christie Vilsack contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1119 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Ms. Karen J. Keefer | | Date of Receipt MM / DD / YYYY 07 / 01 / 2011 |
| Mailing Address 1720 Valota Road | | Transaction ID : 3021765 |
| City Redwood City | State CA | Zip Code 94061 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 125 | |
| Name of Employer N/A | Occupation Retired | Christie Vilsack contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Ms. Pamela L Lowry | | Date of Receipt MM / DD / YYYY 07 / 27 / 2011 |
| Mailing Address 27 Oak Road | | Transaction ID : 3035044 |
| City Santa Cruz | State CA | Zip Code 95060 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100 | |
| Name of Employer N/A | Occupation Retired | Christie Vilsack contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Nora Dunn | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 |
| Mailing Address 2315 W Thomas | | Transaction ID : 3024193 |
| City Chicago | State IL | Zip Code 60622 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50 | |
| Name of Employer self | Occupation actress | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1120 OF 2452 |
| | <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. Laura E. Layton
 Full Name (Last, First, Middle Initial)
 Mailing Address 230 East 15th Street, #12-C
 City State Zip Code
 New York NY 10003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United Nations Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2011
Transaction ID : 3022049
 Amount of Each Receipt this Period
 100
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Hedy M Ratner
 Full Name (Last, First, Middle Initial)
 Mailing Address 1960 Lincoln Park West #2301
 City State Zip Code
 Chicago IL 60614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Women's Business Development Center Administrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2011
Transaction ID : 3023019
 Amount of Each Receipt this Period
 50
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Jerry A. Ellis
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 544
 City State Zip Code
 Long Beach WA 98631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Washington State Adminstrator
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024613
 Amount of Each Receipt this Period
 100
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|---|------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1121 OF 2452 |
| | <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. Mary H. Westoby | | Date of Receipt MM / DD / YYYY 07 / 15 / 2011 |
| Mailing Address 11047 E Mirasol Cir | | Transaction ID : 3029048 |
| City Scottsdale | State AZ | Zip Code 85255 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25 | |
| Name of Employer Self | Occupation Artist | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Mrs. Bette S. Paris | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 607 N. Arden Drive | | Transaction ID : 3023101 |
| City Beverly Hills | State CA | Zip Code 90210 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50 | |
| Name of Employer Self | Occupation Attorney | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Ms. E. Marianne Gabel | | Date of Receipt MM / DD / YYYY 07 / 08 / 2011 |
| Mailing Address 49 forest ave. | | Transaction ID : 3025433 |
| City Delaware | State OH | Zip Code 43015 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500 | |
| Name of Employer self employed | Occupation Attorney | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1122 OF 2452 |
| | <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. Sue C Hansen
 Full Name (Last, First, Middle Initial)
 Mailing Address 6927 Fairmount Ave.
 City El Cerrito State CA Zip Code 94530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Occupation Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 10 / 2011**
Transaction ID : 3025513
 Amount of Each Receipt this Period **100**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Ann J. Remers
 Full Name (Last, First, Middle Initial)
 Mailing Address 5022 E. Calle Guebabi
 City Tuscon State AZ Zip Code 85718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Occupation Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 19 / 2011**
Transaction ID : 3030303
 Amount of Each Receipt this Period **200**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. John Auyong
 Full Name (Last, First, Middle Initial)
 Mailing Address 835 1/2 South Sycamore Avenue
 City Los Angeles State CA Zip Code 90036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Occupation Attorney Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 03 / 2011**
Transaction ID : 3021669
 Amount of Each Receipt this Period **10**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1123 OF 2452 |
| | <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. Kate Rubbelke

Mailing Address 1194 Glenmeade Drive Apt E

City State Zip Code
St. Louis MO 63043

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

Name of Employer Occupation
Pulaski Bank bank clerk

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0

Date of Receipt
07 / 22 / 2011
Transaction ID : 3032249

Amount of Each Receipt this Period
20

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Ms. Connie Clement

Mailing Address PO Box 1454

City State Zip Code
Ponca City OK 74602

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

Name of Employer Occupation
USPS Clerk

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0

Date of Receipt
07 / 25 / 2011
Transaction ID : 3032767

Amount of Each Receipt this Period
50

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Ms. Margaret W. Johnson

Mailing Address 9190 Brier Rd.

City State Zip Code
La Mesa CA 91942

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

Name of Employer Occupation
Grossmont College College Instructor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0

Date of Receipt
07 / 06 / 2011
Transaction ID : 3024608

Amount of Each Receipt this Period
50

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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 1124 OF 2452 |
| <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. Cathy Cox
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 409

| | | |
|----------------------|-------------|-------------------|
| City Young Harris | State GA | Zip Code 30582 |
|----------------------|-------------|-------------------|

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

| | |
|--|---------------------------------|
| Name of Employer Young Harris College | Occupation College President |
|--|---------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 08 | | 2011 |

Transaction ID : 3025649

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 00 |
|-----|---|----|

200

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

B. Ms. Eliza Thorne
Full Name (Last, First, Middle Initial)
Mailing Address 4453 Gentry Ave.

| | | |
|---------------------|-------------|-------------------|
| City Studio City | State CA | Zip Code 91607 |
|---------------------|-------------|-------------------|

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

| | |
|---------------------------------------|------------------------------------|
| Name of Employer self (C.T.C.R.E.) | Occupation commercial real esta |
|---------------------------------------|------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 06 | | 2011 |

Transaction ID : 3024285

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 25 |
|-----|---|----|

25

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

C. Rebecca Kremer
Full Name (Last, First, Middle Initial)
Mailing Address 2228 Ruby Road

| | | |
|----------------|-------------|-------------------|
| City Hudson | State WI | Zip Code 54016 |
|----------------|-------------|-------------------|

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

| | |
|--|-----------------------------------|
| Name of Employer Formerly Medtronic, Inc. | Occupation Community Volunteer |
|--|-----------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 08 | | 2011 |

Transaction ID : 3025461

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 10 |
|-----|---|----|

10

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1125 OF 2452 |
| <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. Mr. Kicab Castaneda-Mendez
Full Name (Last, First, Middle Initial)

Mailing Address 112 Rhododendron CT

City Chapel Hill State NC Zip Code 27517

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

Name of Employer self Occupation consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 02 / 2011**

Transaction ID : 3021795

Amount of Each Receipt this Period **25**

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

B. Mr. Thomas H. Logan
Full Name (Last, First, Middle Initial)

Mailing Address 505 College Avenue, S.E.

City Grand Rapids State MI Zip Code 49503

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

Name of Employer Self Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 11 / 2011**

Transaction ID : 3026214

Amount of Each Receipt this Period **100**

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

C. Ms. Joan Dolan Biblo
Full Name (Last, First, Middle Initial)

Mailing Address 8707 Riggs Lane # 4

City Overland Park State KS Zip Code 66212

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

Name of Employer Self Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 12 / 2011**

Transaction ID : 3026780

Amount of Each Receipt this Period **100**

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1126 OF 2452 |
| | <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. Virginia S. Kimball | | Date of Receipt MM / DD / YYYY 07 / 18 / 2011 |
| Mailing Address 1685 La Vista Place | | Transaction ID : 3029427 |
| City Pasadena | State CA | Zip Code 91103 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100 | |
| Name of Employer Occupation Consultant | Claire McCaskill Contributions | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Ms. Judy A. Bates | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 |
| Mailing Address 12504 E. 34th Street | | Transaction ID : 3024163 |
| City Independence | State MO | Zip Code 64055 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25 | |
| Name of Employer Occupation Independent Mechanical Services co-owner | Claire McCaskill Contributions | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Ms. Amy Sherman Palladino | | Date of Receipt MM / DD / YYYY 07 / 21 / 2011 |
| Mailing Address 15260 Ventura #1040 | | Transaction ID : 3031657 |
| City Sherman Oaks | State CA | Zip Code 91403 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 1000 | |
| Name of Employer Occupation Warner Bros (Gilmore Girls) Creator/Director/Producer | Claire McCaskill Contributions | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1127 OF 2452 |
| <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. Mary Schieffer
Full Name (Last, First, Middle Initial)
Mailing Address 3913 West Forest Home Avenue
City Milwaukee State WI Zip Code 53215
FEC ID number of contributing federal political committee. **C**
Name of Employer Milwaukee Police Dept. Occupation Detective
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 18 / 2011**
Transaction ID : 3029422
Amount of Each Receipt this Period **50**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

B. Sam Sero
Full Name (Last, First, Middle Initial)
Mailing Address 12500 Washington Place, Apt. 7 Apt. 7
City Los Angeles State CA Zip Code 90066
FEC ID number of contributing federal political committee. **C**
Name of Employer Maker Studios Occupation Digital Uploader
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 16 / 2011**
Transaction ID : 3028991
Amount of Each Receipt this Period **10**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

C. Judy Brownstein
Full Name (Last, First, Middle Initial)
Mailing Address 2601 E Windsor Ave
City Phoenix State AZ Zip Code 85008
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation disabled
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 10 / 2011**
Transaction ID : 3025411
Amount of Each Receipt this Period **5**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

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|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 1128 OF 2452 |
| | <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. Deborah Bulger
 Full Name (Last, First, Middle Initial)
 Mailing Address 1603 King Street
 City Santa Cruz State CA Zip Code 95060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Editor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 22 / 2011**
Transaction ID : 3031646
 Amount of Each Receipt this Period **100**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Dr. Mary Giegengack-Jureller
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 Euclid Ave.
 City Syracuse State NY Zip Code 13224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Le Moyne College Occupation Educator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023088
 Amount of Each Receipt this Period **40**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Corinne Orts Gunkle
 Full Name (Last, First, Middle Initial)
 Mailing Address 1610 Woodbridge Lane
 City Center Valley State PA Zip Code 18034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lucent Technologies Occupation Electrical Eng.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022065
 Amount of Each Receipt this Period **50**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

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|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 1129 OF 2452 |
| | <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. Lisa M. Schwerdt
Full Name (Last, First, Middle Initial)
Mailing Address 5337 California Ave
City Bethel Park State PA Zip Code 15102
FEC ID number of contributing federal political committee. **C**
Name of Employer California Univ. of Penn. Occupation English Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 22 / 2011**
Transaction ID : 3032352
Amount of Each Receipt this Period **10**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

B. Mr. Ken Harstad
Full Name (Last, First, Middle Initial)
Mailing Address 12719 Shenley Street
City Sylmar State CA Zip Code 91342
FEC ID number of contributing federal political committee. **C**
Name of Employer JPL Pasadena CA Occupation Engr.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026243
Amount of Each Receipt this Period **200**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

C. Ms. Cynthia B. Hortin
Full Name (Last, First, Middle Initial)
Mailing Address 2096 Cynthia Drive
City Tallahassee State FL Zip Code 32303
FEC ID number of contributing federal political committee. **C**
Name of Employer unemployed Occupation family caregiver/hom
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024405
Amount of Each Receipt this Period **50**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1130 OF 2452 |
| <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. Irene McDonnell M Cahill
 Full Name (Last, First, Middle Initial)
 Mailing Address 657 Virginia Ave
 City East Lansing State MI Zip Code 48823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer City of Lansing Occupation Forester
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023073
 Amount of Each Receipt this Period **25**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Alvenia Cottingham
 Full Name (Last, First, Middle Initial)
 Mailing Address 16816 s. 25th place
 City Phoenix State AZ Zip Code 85048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer medical leave Occupation health care administ
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024181
 Amount of Each Receipt this Period **25**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Dr. Lisa Kaplowitz
 Full Name (Last, First, Middle Initial)
 Mailing Address 2228 King Street
 City Alexandria State VA Zip Code 22301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Virginia Dept of Health Occupation Health Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 07 / 2011**
Transaction ID : 3025210
 Amount of Each Receipt this Period **250**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1131 OF 2452 |
| | <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. Shirley H. Wells | | Date of Receipt MM / DD / YYYY 07 / 11 / 2011 |
| Mailing Address 114 Drawbridge PL | | Transaction ID : 3026179 |
| City Fairfield Bay | State AR | Zip Code 72088 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25 | |
| Name of Employer none | Occupation Home maker | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Gail Colborn | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 |
| Mailing Address 7854 Belcher Lane | | Transaction ID : 3024176 |
| City Land O Lakes | State FL | Zip Code 34639 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 5 | |
| Name of Employer n/a | Occupation homemaker | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Mrs. Martha H. Talbot | | Date of Receipt MM / DD / YYYY 07 / 07 / 2011 |
| Mailing Address 6656 Chilton Court | | Transaction ID : 3025212 |
| City McLean | State VA | Zip Code 22101 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500 | |
| Name of Employer n/a | Occupation Homemaker | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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|---|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 1132 OF 2452 |
| | (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

A. Ms. Jenny Bateman Mudge
Full Name (Last, First, Middle Initial)
Mailing Address 2614 Ellentown Road

| | | |
|------------------|-------------|-------------------|
| City La Jolla | State CA | Zip Code 92037 |
|------------------|-------------|-------------------|

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

| | |
|-------------------------|-------------------------|
| Name of Employer n/a | Occupation Homemaker |
|-------------------------|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 22 | / | 2011 |

Transaction ID : 3032482

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 00 |
| 500 | | |

 Claire McCaskill Contributions

[MEMO ITEM]
MEMO

B. Myra Rieger
Full Name (Last, First, Middle Initial)
Mailing Address 7000 E. Quincy Ave. C-209

| | | |
|----------------|-------------|-------------------|
| City Denver | State CO | Zip Code 80237 |
|----------------|-------------|-------------------|

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

| | |
|-------------------------|-------------------------|
| Name of Employer n/a | Occupation Housewife |
|-------------------------|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 06 | / | 2011 |

Transaction ID : 3024259

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 00 |
| 10 | | |

 Claire McCaskill Contributions

[MEMO ITEM]
MEMO

C. Ms. Mary Lou Brown
Full Name (Last, First, Middle Initial)
Mailing Address 139 Via Baja

| | | |
|-----------------|-------------|-------------------|
| City Ventura | State CA | Zip Code 93003 |
|-----------------|-------------|-------------------|

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

| | |
|-------------------------|-------------------------|
| Name of Employer n/a | Occupation housewife |
|-------------------------|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 15 | / | 2011 |

Transaction ID : 3029047

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 00 |
| 100 | | |

 Claire McCaskill Contributions

[MEMO ITEM]
MEMO

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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|---|------------------------------|-----------------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 1133 OF 2452 |
| <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. Louise M. Torgerson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3400 E Superior St
 City Seattle State WA Zip Code 98122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation housewife
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 18 / 2011**
Transaction ID : 3029413
 Amount of Each Receipt this Period **100**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Susie Langdon Kass
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 Vista Verde Court
 City San Francisco State CA Zip Code 94131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UC-San Francisco Occupation Instructor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024602
 Amount of Each Receipt this Period **250**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Sally Maier
 Full Name (Last, First, Middle Initial)
 Mailing Address 2519 8th Street
 City Livermore State CA Zip Code 94550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Las Positas College Occupation Instructor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 14 / 2011**
Transaction ID : 3027411
 Amount of Each Receipt this Period **100**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 1134 OF 2452 (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

A. Mr. John Dan Fullerton
Full Name (Last, First, Middle Initial)
Mailing Address 70 Spring Pond Drive
City Ossining State NY Zip Code 10562
FEC ID number of contributing federal political committee. **C**
Name of Employer First Presbyterian Church Occupation Interum Pastor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 21 / 2011
Transaction ID : 3031650
Amount of Each Receipt this Period 200
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

B. Ms. Nan Guslander
Full Name (Last, First, Middle Initial)
Mailing Address 5501A Balcones Drive
City Austin State TX Zip Code 78731
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation investor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 18 / 2011
Transaction ID : 3029480
Amount of Each Receipt this Period 100
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

c. Mr. Jason Kemp
Full Name (Last, First, Middle Initial)
Mailing Address 10 8th Ave
City Waterford State CT Zip Code 06385
FEC ID number of contributing federal political committee. **C**
Name of Employer State of Connecticut Occupation Judicial Branch Empl
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 28 / 2011
Transaction ID : 3035635
Amount of Each Receipt this Period 100
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

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| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 1135 OF 2452 |
| <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. Catherine Hodgman Helm
Full Name (Last, First, Middle Initial)
Mailing Address 227 So. Windsor Blvd.
City Los Angeles State CA Zip Code 90004
FEC ID number of contributing federal political committee. **C**
Name of Employer self-employed Occupation lawyer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 0

Date of Receipt 07 / 01 / 2011
Transaction ID : 3022042
Amount of Each Receipt this Period 100
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

B. Ms. Julie Simon
Full Name (Last, First, Middle Initial)
Mailing Address 1231 Harvard Street Apt N
City Santa Monica State CA Zip Code 90404
FEC ID number of contributing federal political committee. **C**
Name of Employer justice Occupation lawyer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 0

Date of Receipt 07 / 07 / 2011
Transaction ID : 3025327
Amount of Each Receipt this Period 50
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

C. Ms. Linda Roberts Zinn
Full Name (Last, First, Middle Initial)
Mailing Address 400 S. Steele St # 54
City Denver State CO Zip Code 80209
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Lawyer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 0

Date of Receipt 07 / 14 / 2011
Transaction ID : 3027414
Amount of Each Receipt this Period 100
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
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| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 1136 OF 2452 |
| | <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. Fran Rush | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 |
| Mailing Address 215 Hanauma Drive | | Transaction ID : 3024263 |
| City Bastrop | State TX | Zip Code 78602 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 10 | |
| Name of Employer The University of Texas at Austin | Occupation Lecturer-part time | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Mrs. Melissa E. Trevvett | | Date of Receipt MM / DD / YYYY 07 / 16 / 2011 |
| Mailing Address 1225 E. 54th St. | | Transaction ID : 3027747 |
| City Chicago | State IL | Zip Code 60615 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50 | |
| Name of Employer Boston Library Consortium | Occupation Librarian | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. byron marsh | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 |
| Mailing Address 64939 E. Pine Tree Way | | Transaction ID : 3024238 |
| City Rhododendron | State OR | Zip Code 97049 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 10 | |
| Name of Employer RLK Company | Occupation maintenance worker | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 1137 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Mark Murai
 Full Name (Last, First, Middle Initial)
 Mailing Address 4661 Albany Circle, Apt. 122
 City SAN JOSE State CA Zip Code 95129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bay Area Glass Institute Occupation Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024249
 Amount of Each Receipt this Period **25**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Bonnie W. Eisenfeld
 Full Name (Last, First, Middle Initial)
 Mailing Address 2031 Locust Street, Apt. 402
 City Philadelphia State PA Zip Code 19103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Market Research Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024640
 Amount of Each Receipt this Period **100**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Kathryn Holeyfield
 Full Name (Last, First, Middle Initial)
 Mailing Address 774 E. Charleston Road
 City Palo Alto State CA Zip Code 94303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 03 / 2011**
Transaction ID : 3021708
 Amount of Each Receipt this Period **20**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 1138 OF 2452 |
| <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. Jeanne Y. Turgeon
 Full Name (Last, First, Middle Initial)
 Mailing Address 4139 19th Avenue SW
 City Seattle State WA Zip Code 98106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Univ. of Washington Occupation Medical Technologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023050
 Amount of Each Receipt this Period **10**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Clare Vincent
 Full Name (Last, First, Middle Initial)
 Mailing Address 326 East 85th Street, Apt G
 City New York State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Metro. Museum Of Art Occupation Museum Curator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 22 / 2011**
Transaction ID : 3031643
 Amount of Each Receipt this Period **50**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Julie A. Eidsvoog
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 15492
 City Beverly Hills State CA Zip Code 90209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-employed Occupation Musician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 03 / 2011**
Transaction ID : 3021700
 Amount of Each Receipt this Period **100**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1139 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

Full Name (Last, First, Middle Initial)
A. Teresa Hargrove

Mailing Address 524 Westcrest

City Nashville State TN Zip Code 37211

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

Name of Employer self Occupation musician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2011

Transaction ID : 3025293

Amount of Each Receipt this Period
 10

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Ms. Lois E. Gullerud

Mailing Address 1208 W. Daniel

City Champaign State IL Zip Code 61821

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

Name of Employer Self Occupation Musician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2011

Transaction ID : 3029051

Amount of Each Receipt this Period
 100

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
c. Ms. Joan Creigh Little

Mailing Address 11986 Alpine Terrace

City San Diego State CA Zip Code 92128

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2011

Transaction ID : 3021787

Amount of Each Receipt this Period
 10

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 1140 OF 2452 |
| | <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. Janet P Wolf
 Full Name (Last, First, Middle Initial)
 Mailing Address 2465 SW Timberline Dr
 City Portland State OR Zip Code 97225
 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 **0**

Date of Receipt **07 / 10 / 2011**
Transaction ID : 3025502
 Amount of Each Receipt this Period **50**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Elaine M. Will
 Full Name (Last, First, Middle Initial)
 Mailing Address 1570 Lexington Ave
 City San Mateo State CA Zip Code 94402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation none.00
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024335
 Amount of Each Receipt this Period **25**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Terry Ellen Robinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 3662 Midvale Avenue, #5
 City Los Angeles State CA Zip Code 90034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Not employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 07 / 2011**
Transaction ID : 3025319
 Amount of Each Receipt this Period **10**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

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| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 1141 OF 2452 |
| | <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. Elizabeth B. Flanagan
 Full Name (Last, First, Middle Initial)
 Mailing Address 844 dorian rd
 City Westfield State NJ Zip Code 07090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer na Occupation not employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 07 / 21 / 2011
Transaction ID : 3031641
 Amount of Each Receipt this Period
 100
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Mrs. Deanna K. Celico
 Full Name (Last, First, Middle Initial)
 Mailing Address 37 Butternut Drive
 City North Kingstown State RI Zip Code 02852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Fabrig Gallery Occupation Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 07 / 01 / 2011
Transaction ID : 3022089
 Amount of Each Receipt this Period
 10
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Joy Silver
 Full Name (Last, First, Middle Initial)
 Mailing Address 1059 W Skylark Drive
 City Palatine State IL Zip Code 60067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Drs. Bedingfield and Rosen Occupation Pediatrician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 07 / 15 / 2011
Transaction ID : 3029043
 Amount of Each Receipt this Period
 100
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1142 OF 2452 |
| | <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. Ms. Mildred Weissman | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 |
| Mailing Address 81 Manursing Way | | Transaction ID : 3024290 |
| City Rye | State NY | Zip Code 10580 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000 |
| Name of Employer Retired | Occupation Philanthropist | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Kathleen Baldwin | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 418 15th St | | Transaction ID : 3023114 |
| City Wilmette | State IL | Zip Code 60091 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 75 |
| Name of Employer self | Occupation Physician | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Elizabeth Barry | | Date of Receipt MM / DD / YYYY 07 / 18 / 2011 |
| Mailing Address 26 Dembeigh Hill Circle | | Transaction ID : 3029420 |
| City Baltimore | State MD | Zip Code 21210 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 125 |
| Name of Employer University of Maryland | Occupation Physician | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1143 OF 2452 |
| | <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. 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 GA Health Sciencea Univ Occupation Physician/educator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2011

Transaction ID : 3032010

Amount of Each Receipt this Period
 100

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

B. Ms. Mary H. DuPree
Full Name (Last, First, Middle Initial)

Mailing Address 320 N. Adams

City Moscow State ID Zip Code 83843

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

Name of Employer University of Idaho Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2011

Transaction ID : 3023014

Amount of Each Receipt this Period
 100

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

C. Ms. Donna Bahry Bartlett
Full Name (Last, First, Middle Initial)

Mailing Address 628 Fairway Road

City State College State PA Zip Code 16803

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

Name of Employer Penn State University Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2011

Transaction ID : 3035102

Amount of Each Receipt this Period
 100

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1144 OF 2452 |
| | <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. Marion Taylor Taylor Baer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3636 Corinth Ave
 City Los Angeles State CA Zip Code 90066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer USC Occupation Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 28 / 2011**
Transaction ID : 3035690
 Amount of Each Receipt this Period **25**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Dr. Bayard T. Storey Ph.D.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1919 Brandywine Street
 City Philadelphia State PA Zip Code 19130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Pennsylvania Occupation Professor Emeritus
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 13 / 2011**
Transaction ID : 3027409
 Amount of Each Receipt this Period **1000**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Gisa Indenbaum
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 W 86th St 12E
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024344
 Amount of Each Receipt this Period **100**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1145 OF 2452 |
| | <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. Sarah Evan

Mailing Address 11 Martins Run Apt B103

| | | |
|---------------|-------------|-------------------|
| City Media | State PA | Zip Code 19063 |
|---------------|-------------|-------------------|

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

| | |
|--------------------------|----------------------------|
| Name of Employer Self | Occupation Psychologist |
|--------------------------|----------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2011

Transaction ID : 3025559

Amount of Each Receipt this Period
25

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Dr. Judith S. McCleary

Mailing Address 2680 Natoma Street

| | | |
|---------------|-------------|-------------------|
| City Miami | State FL | Zip Code 33133 |
|---------------|-------------|-------------------|

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

| | |
|--------------------------|----------------------------|
| Name of Employer Self | Occupation Psychologist |
|--------------------------|----------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2011

Transaction ID : 3025626

Amount of Each Receipt this Period
100

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Dr. Wendy Santin Rapaport

Mailing Address 19372cedar glen dr

| | | |
|--------------------|-------------|-------------------|
| City Boca Raton | State FL | Zip Code 33434 |
|--------------------|-------------|-------------------|

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

| | |
|--------------------------|----------------------------|
| Name of Employer Self | Occupation Psychologist |
|--------------------------|----------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : 3026165

Amount of Each Receipt this Period
10

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1146 OF 2452 |
| | <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. Dr. Lloyd Meadow
 Full Name (Last, First, Middle Initial)
 Mailing Address 355 Oak Park Drive
 City San Francisco State CA Zip Code 94131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self employed Occupation psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt
 07 / 12 / 2011
Transaction ID : 3027125
 Amount of Each Receipt this Period
 50
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Leslie Hefner
 Full Name (Last, First, Middle Initial)
 Mailing Address 424 Little Lake Drive Apt. 33
 City Ann Arbor State MI Zip Code 48103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt
 07 / 15 / 2011
Transaction ID : 3029044
 Amount of Each Receipt this Period
 100
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Rita Collins
 Full Name (Last, First, Middle Initial)
 Mailing Address 645 Q Street North West
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Washington Hospital Center Occupation R.N.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt
 07 / 06 / 2011
Transaction ID : 3024447
 Amount of Each Receipt this Period
 25
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1147 OF 2452 |
| <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. Martha Schoenemann
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 216

| | | |
|---|--------------------------------------|------------------|
| City Pawlet | State VT | Zip Code 5761 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Bob Schoenemann RE Service | Occupation Real Estate | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

Date of Receipt
07 / 26 / 2011
Transaction ID : 3035094

Amount of Each Receipt this Period
50
Claire McCaskill Contributions

[MEMO ITEM]
MEMO

B. Ms. Harriet Geragosian
Full Name (Last, First, Middle Initial)
Mailing Address 33 RECANO RD

| | | |
|---|--------------------------------------|-------------------|
| City new britain | State CT | Zip Code 06053 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer UNIQUE REALTY | Occupation REAL ESTATE BROKER | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

Date of Receipt
07 / 06 / 2011
Transaction ID : 3024203

Amount of Each Receipt this Period
25
Claire McCaskill Contributions

[MEMO ITEM]
MEMO

C. clara posin
Full Name (Last, First, Middle Initial)
Mailing Address 1837 peaceful hills rd

| | | |
|---|--------------------------------------|-------------------|
| City walnut | State CA | Zip Code 91789 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer century 21 americana | Occupation realtor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

Date of Receipt
07 / 06 / 2011
Transaction ID : 3024253

Amount of Each Receipt this Period
25
Claire McCaskill Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1148 OF 2452 |
| | <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. Pat C. Bevis | | Date of Receipt MM / DD / YYYY 07 / 08 / 2011 |
| Mailing Address 3519 Peppermint Court | | Transaction ID : 3025650 |
| City Tucker | State GA | Zip Code 30084 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50 | |
| Name of Employer Nelson-Rives Realty, Inc. | Occupation Realtor | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Ms. Susanne M. Yokel | | Date of Receipt MM / DD / YYYY 07 / 01 / 2011 |
| Mailing Address 8208 Fenway Road | | Transaction ID : 3021821 |
| City Bethesda | State MD | Zip Code 20817 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Ms. Antoinette B. D'Oronzio | | Date of Receipt MM / DD / YYYY 07 / 01 / 2011 |
| Mailing Address 2905 W. Fountain Blvd. | | Transaction ID : 3022067 |
| City Tampa | State FL | Zip Code 33609 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1149 OF 2452 |
| | <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. Margret Jacoby
 Full Name (Last, First, Middle Initial)
 Mailing Address 912 Blossom Drive
 City Santa Clara State CA Zip Code 95050
 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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2011
Transaction ID : 3022080
 Amount of Each Receipt this Period
100
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Karen Beetham
 Full Name (Last, First, Middle Initial)
 Mailing Address 5234 Nobis Ct.
 City Davenport State IA Zip Code 52802
 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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2011
Transaction ID : 3022097
 Amount of Each Receipt this Period
100
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Barbara Gorenstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 1919 Chestnut Street, # 917
 City Philadelphia State PA Zip Code 19103
 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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2011
Transaction ID : 3023067
 Amount of Each Receipt this Period
15
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1150 OF 2452 |
| | <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. Gloria Galligane
 Full Name (Last, First, Middle Initial)
 Mailing Address 395 Riverside Drive Apt. 12AE
 City New York State NY Zip Code 10025
 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 **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023117
 Amount of Each Receipt this Period **25**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Anne Pinkerton
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Kimberton Rd Apt J3
 City Phoenixville State PA Zip Code 19460
 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 **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023136
 Amount of Each Receipt this Period **10**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Judith Strode
 Full Name (Last, First, Middle Initial)
 Mailing Address 33 Hidden Valley Ln.
 City Rogue River State OR Zip Code 97537
 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 **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023144
 Amount of Each Receipt this Period **15**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1151 OF 2452 |
| | <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. Virginia Smith | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 52 Squire Hill Rd. | | Transaction ID : 3023146 |
| City New Milford | State CT | Zip Code 06776 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Ms. Tena Rosner | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 2935 Brighton Rd. | | Transaction ID : 3023147 |
| City Cleveland | State OH | Zip Code 44120 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 15 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Ms. Sandy Gruver | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 |
| Mailing Address 419 Hedgerow Court | | Transaction ID : 3024636 |
| City Mountatin View | State CA | Zip Code 94041 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1152 OF 2452 |
| | (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. Dorothea Batchelder
Full Name (Last, First, Middle Initial)
Mailing Address 1558 Philip Dr
City Healdsburg State CA Zip Code 95448
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 ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024645
Amount of Each Receipt this Period **50**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

B. Ms. Nancy G. Appling
Full Name (Last, First, Middle Initial)
Mailing Address 2647 Isabelle Avenue
City San Mateo State CA Zip Code 94403
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 ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024654
Amount of Each Receipt this Period **100**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

C. Ms. Cheryl Washington
Full Name (Last, First, Middle Initial)
Mailing Address 6258 Cottle Road
City San Jose State CA Zip Code 95123
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 ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024659
Amount of Each Receipt this Period **20**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1153 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Ira Clark
 Full Name (Last, First, Middle Initial)
 Mailing Address 8906 S.W. 17th Avenue
 City Gainesville State FL Zip Code 32607
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2011
Transaction ID : 3025643
 Amount of Each Receipt this Period
 100
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Penelope P. Biggs
 Full Name (Last, First, Middle Initial)
 Mailing Address 240 E 47th Street., Apt. 23D
 City New York State NY Zip Code 10017
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2011
Transaction ID : 3025644
 Amount of Each Receipt this Period
 500
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Mr. Patrick McIntosh
 Full Name (Last, First, Middle Initial)
 Mailing Address 3885 Paseo Del Prado St
 City Boulder State CO Zip Code 80301
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2011
Transaction ID : 3025672
 Amount of Each Receipt this Period
 50
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1154 OF 2452 |
| | <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. Nancy Lincoln
Full Name (Last, First, Middle Initial)

Mailing Address 43 Hedge Rd

City Brookline State MA Zip Code 02445

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2011

Transaction ID : 3026160

Amount of Each Receipt this Period
 50

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

B. Ms. Amy Crofts
Full Name (Last, First, Middle Initial)

Mailing Address 605 E Court St

City Viroqua State WI Zip Code 54665

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2011

Transaction ID : 3026190

Amount of Each Receipt this Period
 10

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 5 Boulder Brook Ct

City Belle Mead State NJ Zip Code 08502

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2011

Transaction ID : 3026221

Amount of Each Receipt this Period
 100

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1155 OF 2452 |
| | <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. Lili Townsend
Full Name (Last, First, Middle Initial)
Mailing Address 3288 Waileia Place

| | | |
|----------------|-------------|-------------------|
| City Wailea | State HI | Zip Code 96753 |
|----------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 11 | | 2011 |

Transaction ID : 3026236

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 00 |
|-----|---|----|

100

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

B. Ms. Roberta M. Block
Full Name (Last, First, Middle Initial)
Mailing Address 54 Cornwall Ln.

| | | |
|-------------------------|-------------|-------------------|
| City Port Washington | State NY | Zip Code 11050 |
|-------------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 11 | | 2011 |

Transaction ID : 3026247

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 00 |
|-----|---|----|

100

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

C. Ms. Sally Goren
Full Name (Last, First, Middle Initial)
Mailing Address 215 Pin Oak Drive

| | | |
|------------------|-------------|-------------------|
| City Wilmette | State IL | Zip Code 60091 |
|------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 11 | | 2011 |

Transaction ID : 3026253

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 25 |
|-----|---|----|

25

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

| | | | | |
|--|--|-----|---|----|
| SUBTOTAL of Receipts This Page (optional).....▶ | <table border="1"><tr><td>000</td><td>.</td><td>00</td></tr></table> | 000 | . | 00 |
| 000 | . | 00 | | |
| TOTAL This Period (last page this line number only).....▶ | <table border="1"><tr><td>000</td><td>.</td><td>00</td></tr></table> | 000 | . | 00 |
| 000 | . | 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 1156 OF 2452 |
| | <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. Kay Blackburn
Full Name (Last, First, Middle Initial)
Mailing Address 78585 Vista Del Fuente
City Indian Wells State CA Zip Code 92210
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 0

Date of Receipt 07 / 11 / 2011
Transaction ID : 3026259
Amount of Each Receipt this Period 100
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

B. Ms. Jeanne D. Feldman
Full Name (Last, First, Middle Initial)
Mailing Address 18655 W. Bernardo Drive # 468
City San Diego State CA Zip Code 92127
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 0

Date of Receipt 07 / 12 / 2011
Transaction ID : 3026771
Amount of Each Receipt this Period 50
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

C. Pearl Spiro
Full Name (Last, First, Middle Initial)
Mailing Address 62 New York Avenue
City Congers State NY Zip Code 10920
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 0

Date of Receipt 07 / 12 / 2011
Transaction ID : 3026812
Amount of Each Receipt this Period 50
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1157 OF 2452 |
| | <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. Jill Bogard
 Full Name (Last, First, Middle Initial)
 Mailing Address 2755 Macomb Street NW
 Apt. 405
 City Washington State DC Zip Code 20008
 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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 13 / 2011
Transaction ID : 3027296
 Amount of Each Receipt this Period
25
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Dr. Jane W. Garfield
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 985
 37 Parker Pt. Road
 City Blue Hill State ME Zip Code 04614
 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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2011
Transaction ID : 3027421
 Amount of Each Receipt this Period
100
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Frances Israel
 Full Name (Last, First, Middle Initial)
 Mailing Address 17739 Saint Andrews Drive
 City Poway State CA Zip Code 92064
 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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2011
Transaction ID : 3029055
 Amount of Each Receipt this Period
50
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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

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

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| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 1158 OF 2452 |
| | <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. Karla Ingram

Mailing Address 4616 Molsonwood Dr

City Memphis State TN Zip Code 38135

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2011

Transaction ID : 3029433

Amount of Each Receipt this Period
25

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Mr. William Stockard

Mailing Address 2640 E Cardella Rd

City Merced State CA Zip Code 95340

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2011

Transaction ID : 3029580

Amount of Each Receipt this Period
60

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 2009 Princeton Ave.

City Dunedin State FL Zip Code 34698

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 19 / 2011

Transaction ID : 3029933

Amount of Each Receipt this Period
30

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1159 OF 2452 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
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| | | <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. Joan Kirsner
Full Name (Last, First, Middle Initial)
Mailing Address 6 Escalon Drive
City Mill Valley State CA Zip Code 94941
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 **0**

Date of Receipt **07 / 19 / 2011**
Transaction ID : 3030321
Amount of Each Receipt this Period **50**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

B. Mrs. Merrilee A. Cate
Full Name (Last, First, Middle Initial)
Mailing Address 4505 N. O'Connor Road
City Irving State TX Zip Code 75062
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 **0**

Date of Receipt **07 / 19 / 2011**
Transaction ID : 3030324
Amount of Each Receipt this Period **25**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

C. Ms. Virginia M. Krall
Full Name (Last, First, Middle Initial)
Mailing Address 3038 SE 21st Street
City Gresham State OR Zip Code 97080
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 **0**

Date of Receipt **07 / 20 / 2011**
Transaction ID : 3030588
Amount of Each Receipt this Period **50**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1160 OF 2452 |
| | (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. Mr. Walter Bembenista
 Full Name (Last, First, Middle Initial)
 Mailing Address 612 11th Street
 City Brooklyn State NY Zip Code 11215
 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 **0**

Date of Receipt **07 / 21 / 2011**
Transaction ID : 3031651
 Amount of Each Receipt this Period **200**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Sue Fishman
 Full Name (Last, First, Middle Initial)
 Mailing Address 2012 Ardmore Avenue
 City Hermosa Beach State CA Zip Code 90254
 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 **0**

Date of Receipt **07 / 21 / 2011**
Transaction ID : 3031661
 Amount of Each Receipt this Period **25**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Mackie Walker
 Full Name (Last, First, Middle Initial)
 Mailing Address 530 Whiskey Rd.
 City Aiken State SC Zip Code 29801
 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 **0**

Date of Receipt **07 / 21 / 2011**
Transaction ID : 3031666
 Amount of Each Receipt this Period **25**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1161 OF 2452 |
| | <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. Helen B Lee

Mailing Address 12551 Sunbreak Way Ne

City Redmond State WA Zip Code 98053

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2011

Transaction ID : 3031990

Amount of Each Receipt this Period
100

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Ms. Ellen Bell

Mailing Address 1213 Oak Bluff Court

City Westerville State OH Zip Code 43081

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2011

Transaction ID : 3032775

Amount of Each Receipt this Period
25

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Ms. Madeleine G. Kalb

Mailing Address 100 Oxford Street

City Chevy Chase State MD Zip Code 20815

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2011

Transaction ID : 3035107

Amount of Each Receipt this Period
100

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1162 OF 2452 |
| | <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. Claire Mandeville
Full Name (Last, First, Middle Initial)
Mailing Address 91 Kitchell Lake Drive
City West Milford State NJ Zip Code 07480
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 **0**

Date of Receipt **07 / 28 / 2011**
Transaction ID : 3035468
Amount of Each Receipt this Period **5**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

B. Ms. Roberta Cronin
Full Name (Last, First, Middle Initial)
Mailing Address 3618 Porter Street NW
City Washington State DC Zip Code 20016
FEC ID number of contributing federal political committee. **C**
Name of Employer sefl Occupation research & program d
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024352
Amount of Each Receipt this Period **37.5**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

c. Ms. Gayle A. Kaplan
Full Name (Last, First, Middle Initial)
Mailing Address 5929 Walnut Dr
City Minneapolis State MN Zip Code 55436
FEC ID number of contributing federal political committee. **C**
Name of Employer Business Dynamics Inc. Occupation Research Consultant
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024603
Amount of Each Receipt this Period **100**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1163 OF 2452 |
| | <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 Weinstein | | Date of Receipt MM / DD / YYYY 07 / 01 / 2011 Transaction ID : 3021747 |
| Mailing Address 2818 N. 46 Ave. K-492 | | Amount of Each Receipt this Period 50 Claire McCaskill Contributions |
| City Hollywood | State FL | Zip Code 33021 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Eleanor Weinstock | | Date of Receipt MM / DD / YYYY 07 / 01 / 2011 Transaction ID : 3021752 |
| Mailing Address 525 South Flagler Drive | | Amount of Each Receipt this Period 100 Claire McCaskill Contributions |
| City West Palm Beach | State FL | Zip Code 33401 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Elaine Galinson | | Date of Receipt MM / DD / YYYY 07 / 01 / 2011 Transaction ID : 3021758 |
| Mailing Address 7919 Prospect Pl | | Amount of Each Receipt this Period 100 Claire McCaskill Contributions |
| City La Jolla | State CA | Zip Code 92037 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1164 OF 2452 |
| | <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. Karen J. Keefer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1720 Valota Road
 City Redwood City State CA Zip Code 94061
 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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3021764
 Amount of Each Receipt this Period **100**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Marlene H Cianci
 Full Name (Last, First, Middle Initial)
 Mailing Address 1704 Glenkarney PI
 City Silver Spring State MD Zip Code 20902
 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 **0**

Date of Receipt **07 / 03 / 2011**
Transaction ID : 3021808
 Amount of Each Receipt this Period **25**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

c. Mr. Robert Elgin
 Full Name (Last, First, Middle Initial)
 Mailing Address 7261 Kingsbury Blvd
 City University City State MO Zip Code 63130
 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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022045
 Amount of Each Receipt this Period **500**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1165 OF 2452 |
| | <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. Ellanor Malinowski
 Full Name (Last, First, Middle Initial)
 Mailing Address 13 Peacock Court
 City San Rafael State CA Zip Code 94901
 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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2011
Transaction ID : 3022051
 Amount of Each Receipt this Period
100
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Mr. Robert Kansas
 Full Name (Last, First, Middle Initial)
 Mailing Address 725 Robin Way S.
 City Satellite Beach State FL Zip Code 32937
 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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2011
Transaction ID : 3022056
 Amount of Each Receipt this Period
50
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Eleanor B. Silsby
 Full Name (Last, First, Middle Initial)
 Mailing Address 65 South Street
 City Granby State MA Zip Code 01033
 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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2011
Transaction ID : 3022070
 Amount of Each Receipt this Period
25
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
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| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 1166 OF 2452 |
| | (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. Ruth Havighurst Neff | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 1045 4th St | | Transaction ID : 3023011 |
| City Whitefish | State MT | Zip Code 59937 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100 |
| Name of Employer N/A | Occupation retired | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Jan Flapan | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 123 W. Oak St. #N Unit N | | Transaction ID : 3023016 |
| City Chicago | State IL | Zip Code 60610 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500 |
| Name of Employer N/A | Occupation retired | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Emily R Hart | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 1549 Markham Rd. | | Transaction ID : 3023036 |
| City Fayetteville | State AR | Zip Code 72701 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50 |
| Name of Employer N/A | Occupation Retired | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1167 OF 2452 |
| | <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. Gertrude K. Meyers
 Full Name (Last, First, Middle Initial)
 Mailing Address 1240 Colonial Dr.
 City Baton Rouge State LA Zip Code 70806
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2011
Transaction ID : 3023042
 Amount of Each Receipt this Period
 35
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Rose M. Laffoon
 Full Name (Last, First, Middle Initial)
 Mailing Address 20033 Greenwood Avenue N.
 City Shoreline State WA Zip Code 98133
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2011
Transaction ID : 3023045
 Amount of Each Receipt this Period
 50
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Jean J. Robinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 9840 S Pulaski Road # 321
 City Oak Lawn State IL Zip Code 60453
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2011
Transaction ID : 3023055
 Amount of Each Receipt this Period
 100
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

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| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 1168 OF 2452 |
| | <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. Suzanne Colucci | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 7155 Hillside Drive | | Transaction ID : 3023072 |
| City Clarkston | State MI | Zip Code 48346 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 200 |
| Name of Employer N/A | Occupation Retired | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Sandra Rudy | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address P.O. Box 70 | | Transaction ID : 3023081 |
| City Alcalde | State NM | Zip Code 87511 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 40 |
| Name of Employer N/A | Occupation retired | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Susan Chase | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address PO Box 311 | | Transaction ID : 3023090 |
| City Andover | State NH | Zip Code 03216 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100 |
| Name of Employer N/A | Occupation Retired | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1169 OF 2452 |
| | <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. Pat Lewis
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 675
 City South Beach State OR Zip Code 97366
 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 **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2011
Transaction ID : 3023111
 Amount of Each Receipt this Period
 50
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Sherry L. Haagenson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1112 S. Rio Vista Blvd.
 City Fort Lauderdale State FL Zip Code 33316
 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 **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2011
Transaction ID : 3023119
 Amount of Each Receipt this Period
 50
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Linda Bailey
 Full Name (Last, First, Middle Initial)
 Mailing Address P. O. Box 878
 City Morongo Valley State CA Zip Code 92256
 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 **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2011
Transaction ID : 3023126
 Amount of Each Receipt this Period
 20
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|---|------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1170 OF 2452 |
| | <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. Francis E. Rohde
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 2830
 City Chesapeake State VA Zip Code 23327
 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 **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023130
 Amount of Each Receipt this Period **50**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Julia A Dominian
 Full Name (Last, First, Middle Initial)
 Mailing Address 3113 Florence Dr.
 City Latham State NY Zip Code 12110
 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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024190
 Amount of Each Receipt this Period **20**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. LORETTA GARLING
 Full Name (Last, First, Middle Initial)
 Mailing Address 2253 S. 1200 W.
 City FRANCESVILLE State IN Zip Code 47946
 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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024201
 Amount of Each Receipt this Period **10**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1171 OF 2452 |
| | <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. Bruce Iverson
 Full Name (Last, First, Middle Initial)
 Mailing Address 125 S. 18th Street
 City Coolidge State AZ Zip Code 85128
 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 ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024209
 Amount of Each Receipt this Period **5**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Mr. Saul Levy
 Full Name (Last, First, Middle Initial)
 Mailing Address 228 Monroe Street
 City Retired State PA Zip Code 19147
 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 ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024223
 Amount of Each Receipt this Period **50**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Nancy N Lynch
 Full Name (Last, First, Middle Initial)
 Mailing Address 106 W Spring Drive
 City West Lake Hills State TX Zip Code 78746
 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 ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024235
 Amount of Each Receipt this Period **50**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1172 OF 2452 |
| | <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. Miriam McLeod | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 Transaction ID : 3024243 |
| Mailing Address 4826 Pepperwood Avenue | | Amount of Each Receipt this Period 25 Claire McCaskill Contributions |
| City Long Beach | State CA | Zip Code 90808 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Wendelin Montciel | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 Transaction ID : 3024246 |
| Mailing Address 112 ALLERTON STREET | | Amount of Each Receipt this Period 25 Claire McCaskill Contributions |
| City Santa Cruz | State CA | Zip Code 95065 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer N/A | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Bartley Reese | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 Transaction ID : 3024256 |
| Mailing Address 9725 Lamar | | Amount of Each Receipt this Period 30 Claire McCaskill Contributions |
| City Overland Park | State KS | Zip Code 66207 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer N/A | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1173 OF 2452 |
| | <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 Savalick | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 |
| Mailing Address 710 Ruprecht Dr | | Transaction ID : 3024266 |
| City St. Louis | State MO | Zip Code 63125 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 15 |
| Name of Employer N/A | Occupation Retired | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Stephanie Rogall | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 |
| Mailing Address 16107 HURON DRIVE | | Transaction ID : 3024301 |
| City Sun City West | State AZ | Zip Code 85375 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100 |
| Name of Employer N/A | Occupation retired | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Jean Wilcox | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 |
| Mailing Address 1400 Geary Blvd Apt 7G 1400 Geary BLVD Apt 7G | | Transaction ID : 3024308 |
| City San Francisco | State CA | Zip Code 94109 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 35 |
| Name of Employer N/A | Occupation Retired | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1174 OF 2452 |
| | <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. Mrs. Reva Schlesinger
 Full Name (Last, First, Middle Initial)
 Mailing Address 45 India Street
 City Nantucket State MA Zip Code 02554
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024314
 Amount of Each Receipt this Period
 25
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Elizabeth A. Fimbres
 Full Name (Last, First, Middle Initial)
 Mailing Address 5820 N Pontatoc Road
 City Tucson State AZ Zip Code 85718
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024326
 Amount of Each Receipt this Period
 75
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Betty M. Twarog
 Full Name (Last, First, Middle Initial)
 Mailing Address 54 Middle Road
 City Edgcomb State ME Zip Code 04556
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024334
 Amount of Each Receipt this Period
 100
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1175 OF 2452 |
| | <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. Phyllis W. Leslie | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 Transaction ID : 3024338 |
| Mailing Address 101 Rampart Circle | | Amount of Each Receipt this Period 30 Claire McCaskill Contributions |
| City Fairfield Bay | State AR | Zip Code 72088 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Marilyn S. Minto | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 Transaction ID : 3024363 |
| Mailing Address 154 Beach Park Blvd. | | Amount of Each Receipt this Period 30 Claire McCaskill Contributions |
| City Foster City | State CA | Zip Code 94404 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Mr. John Falcone | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 Transaction ID : 3024373 |
| Mailing Address 7 Essex Ct | | Amount of Each Receipt this Period 50 Claire McCaskill Contributions |
| City Berlin | State MD | Zip Code 21811 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer N/A | Occupation RETIRED | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1176 OF 2452 (check only one) |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Carolyn Ann A Legg
 Full Name (Last, First, Middle Initial)
 Mailing Address 853 Washington St.
 City Woodstock State IL Zip Code 60098
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024401
 Amount of Each Receipt this Period
 50
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Beltzer Murray
 Full Name (Last, First, Middle Initial)
 Mailing Address 21230 23rd Ave
 City Bayside State NY Zip Code 11360
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024457
 Amount of Each Receipt this Period
 10
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Gloria J. Fulcher
 Full Name (Last, First, Middle Initial)
 Mailing Address 2925 Roanoke Ct
 City Bakersfield State CA Zip Code 93306
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024614
 Amount of Each Receipt this Period
 25
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1177 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

Full Name (Last, First, Middle Initial)
A. Ms. Jeraldine Trabant

Mailing Address 726 Loveville Road
Cottage 94

City Hockessin State DE Zip Code 19707

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 06 / 2011

Transaction ID : 3024624

Amount of Each Receipt this Period
100

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Ms. Sandra Kehoe

Mailing Address 680 Canterbury Lane

City Cambria State CA Zip Code 93428

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 06 / 2011

Transaction ID : 3024655

Amount of Each Receipt this Period
100

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Ms. Annette Schaumann

Mailing Address 2640 elmdale ct.

City Palo Alto State CA Zip Code 94303

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2011

Transaction ID : 3025324

Amount of Each Receipt this Period
10

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1178 OF 2452 |
| | <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. Karin Shipman
Full Name (Last, First, Middle Initial)
Mailing Address 1400 Hermann Drive #5H
Unit 5H
City Houston State TX Zip Code 77004
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 **0**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2011
Transaction ID : 3025325
Amount of Each Receipt this Period
25
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

B. Mrs. Julie Steckel
Full Name (Last, First, Middle Initial)
Mailing Address 1126 Bel Air Drive
City Santa Barbara State CA Zip Code 93105
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 **0**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2011
Transaction ID : 3025338
Amount of Each Receipt this Period
50
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

C. Ms. Dolores Chase
Full Name (Last, First, Middle Initial)
Mailing Address 1235 E. 200 So. #402
#402
City SLC State UT Zip Code 84102
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 **0**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 10 / 2011
Transaction ID : 3025527
Amount of Each Receipt this Period
35
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1179 OF 2452 |
| | <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. Ruth Gottlieb
Full Name (Last, First, Middle Initial)

Mailing Address 3300 Dary Rd
Apt 5213

City Haverford State PA Zip Code 19041

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 ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 08 / 2011

Transaction ID : 3025532

Amount of Each Receipt this Period
50

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

B. Ms. Jeanette Finkbiner Leeds
Full Name (Last, First, Middle Initial)

Mailing Address 450 Elm Ave

City Haddonfield State NJ Zip Code 08033

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 ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 08 / 2011

Transaction ID : 3025537

Amount of Each Receipt this Period
25

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

c. Mrs. Suzanne Davis
Full Name (Last, First, Middle Initial)

Mailing Address 9203 Cranfield Ln

City Charlotte State NC Zip Code 28277

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 ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 08 / 2011

Transaction ID : 3025546

Amount of Each Receipt this Period
50

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1180 OF 2452 |
| | <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. Grace Leight
 Full Name (Last, First, Middle Initial)
 Mailing Address 205 W. End Avenue, Apt. 6K
 City New York State NY Zip Code 10023
 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 **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025655
 Amount of Each Receipt this Period **250**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Mr. Herman Kurfirst
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 Galer St Apt 54
 City Seattle State WA Zip Code 98109
 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 **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025665
 Amount of Each Receipt this Period **100**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Gwen J Gillis
 Full Name (Last, First, Middle Initial)
 Mailing Address 4722 Amberwood Court
 City Carlsbad State CA Zip Code 92008
 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 **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026147
 Amount of Each Receipt this Period **50**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1181 OF 2452 |
| | <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. Toby Zakin
Full Name (Last, First, Middle Initial)
Mailing Address 3605 Raleigh Mtn Trail
City Charlottesville State VA Zip Code 22903
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 **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026151
Amount of Each Receipt this Period **100**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

B. Marilyn Gordon
Full Name (Last, First, Middle Initial)
Mailing Address 116 Walnut Grove Rd.
City Ridgefield State CT Zip Code 06877
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 **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026194
Amount of Each Receipt this Period **10**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

C. Ms. Sarah K. Huber
Full Name (Last, First, Middle Initial)
Mailing Address 8308 Berry Drive
City Evansville State IN Zip Code 47710
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 **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026207
Amount of Each Receipt this Period **100**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1182 OF 2452 |
| | <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. Shirley J. Parish
 Full Name (Last, First, Middle Initial)
 Mailing Address 1643 North Leeds Avenue
 City Ontario State CA Zip Code 91764
 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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2011
Transaction ID : 3026211
 Amount of Each Receipt this Period
 50
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Marilyn W. Reed
 Full Name (Last, First, Middle Initial)
 Mailing Address 22501 130th Street
 City Danville State IA Zip Code 52623
 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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2011
Transaction ID : 3026220
 Amount of Each Receipt this Period
 100
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Ruth R. Hailperin
 Full Name (Last, First, Middle Initial)
 Mailing Address 175 W. North Street, Apt. 234C
 City Nazaret State PA Zip Code 18064
 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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2011
Transaction ID : 3026225
 Amount of Each Receipt this Period
 100
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1183 OF 2452 |
| | <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. Merryl J. Weber
Full Name (Last, First, Middle Initial)

Mailing Address 5808 Varna Ave

City Van Nuys State CA Zip Code 91401

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : 3026226

Amount of Each Receipt this Period
50

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

B. Ms. Denise Gregory
Full Name (Last, First, Middle Initial)

Mailing Address 4233 County Road 4006

City Tebbetts State MO Zip Code 65080

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : 3026230

Amount of Each Receipt this Period
100

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

C. Ms. Iris L. McPherson
Full Name (Last, First, Middle Initial)

Mailing Address 6223 Mesa Circle

City Stillwater State OK Zip Code 74074

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : 3026241

Amount of Each Receipt this Period
50

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1184 OF 2452 | | |
| | <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 |

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Dr. Beverly J. Gibbs

Mailing Address P.O. Box 279

City State Zip Code
Manchaca TX 78652

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2011
Transaction ID : 3026778

Amount of Each Receipt this Period
 100

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Ms. Marion L. Copenhaver

Mailing Address 80 Lyme Road, Apt. 158

City State Zip Code
Hanover NH 03755

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2011
Transaction ID : 3026779

Amount of Each Receipt this Period
 50

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
c. Ms. Angelica S. Harter

Mailing Address 16 Arlington Street

City State Zip Code
Cambridge MA 02140

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2011
Transaction ID : 3026785

Amount of Each Receipt this Period
 250

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1185 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Ms. Patricia Ann Smith | | Date of Receipt MM / DD / YYYY 07 / 12 / 2011 |
| Mailing Address 234 Crescent Drive | | Transaction ID : 3026788 |
| City Orinda | State CA | Zip Code 94563 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50 |
| Name of Employer N/A | Occupation retired | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Mary E. Dimperio | | Date of Receipt MM / DD / YYYY 07 / 12 / 2011 |
| Mailing Address 4000 Cathedral Avenue NW Apt. 106B | | Transaction ID : 3026794 |
| City Washington | State DC | Zip Code 20016 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100 |
| Name of Employer N/A | Occupation Retired | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Dianne Durrwachter | | Date of Receipt MM / DD / YYYY 07 / 12 / 2011 |
| Mailing Address 809 West 5th Street | | Transaction ID : 3027099 |
| City Port Angeles | State WA | Zip Code 98363 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50 |
| Name of Employer N/A | Occupation Retired | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1186 OF 2452 |
| | <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. Sandra Marshall

Mailing Address 31 Pochet Road

City Orleans State MA Zip Code 02653

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 13 / 2011

Transaction ID : 3027292

Amount of Each Receipt this Period
 25

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Loyc Y. Jones

Mailing Address 1811 Redtop Court

City Longmont State CO Zip Code 80503

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 13 / 2011

Transaction ID : 3027356

Amount of Each Receipt this Period
 20

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Ms. Doris Lauzon

Mailing Address 32629 Anita Drive

City Westland State MI Zip Code 48185

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2011

Transaction ID : 3027416

Amount of Each Receipt this Period
 200

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1187 OF 2452 |
| | <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 K. Lopes
 Full Name (Last, First, Middle Initial)
 Mailing Address 1421 N Camino de Juan
 City Tucson State AZ Zip Code 85745
 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 ▼ 0

Date of Receipt 07 / 14 / 2011
Transaction ID : 3027652
 Amount of Each Receipt this Period 50
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Vivian E. Uttermann
 Full Name (Last, First, Middle Initial)
 Mailing Address 11113 Jollyway
 City Kensington State MD Zip Code 20895
 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 ▼ 0

Date of Receipt 07 / 14 / 2011
Transaction ID : 3027660
 Amount of Each Receipt this Period 12.5
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Elaine K. Cowles
 Full Name (Last, First, Middle Initial)
 Mailing Address 540 Amphill Rd
 City Cartersville State VA Zip Code 23027
 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 ▼ 0

Date of Receipt 07 / 18 / 2011
Transaction ID : 3029502
 Amount of Each Receipt this Period 25
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1188 OF 2452 |
| | <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. Mrs. Emiy B. Rutherford
 Full Name (Last, First, Middle Initial)
 Mailing Address 2862 Raccoon Valley
 City Granville State OH Zip Code 43023
 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 ▼ 0

Date of Receipt
 07 / 19 / 2011
Transaction ID : 3029820
 Amount of Each Receipt this Period
 111.11
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Jo B. Byler
 Full Name (Last, First, Middle Initial)
 Mailing Address 1523 E Woodland Dr
 City Dalton Gardens State ID Zip Code 83815
 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 ▼ 0

Date of Receipt
 07 / 19 / 2011
Transaction ID : 3029890
 Amount of Each Receipt this Period
 7.5
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Beverly Lipman
 Full Name (Last, First, Middle Initial)
 Mailing Address 188
 City Portola Valley State CA Zip Code 94028
 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 ▼ 0

Date of Receipt
 07 / 19 / 2011
Transaction ID : 3029903
 Amount of Each Receipt this Period
 100
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1189 OF 2452 |
| | <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. Judith P. Borden | | Date of Receipt MM / DD / YYYY 07 / 19 / 2011 |
| Mailing Address 16749 Addison Street | | Transaction ID : 3030298 |
| City Encino | State CA | Zip Code 91436 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100 | |
| Name of Employer N/A | Occupation Retired | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Mrs. Ora Band | | Date of Receipt MM / DD / YYYY 07 / 19 / 2011 |
| Mailing Address 333 South La Peer Drive | | Transaction ID : 3030307 |
| City Beverly Hills | State CA | Zip Code 90211 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100 | |
| Name of Employer N/A | Occupation Retired | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Mr. Edward R. Robertson | | Date of Receipt MM / DD / YYYY 07 / 19 / 2011 |
| Mailing Address 2 Greens Way | | Transaction ID : 3030312 |
| City Denver | State PA | Zip Code 17517 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25 | |
| Name of Employer N/A | Occupation Retired | Claire McCaskill Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1190 OF 2452
 (check only one)

| | | | | | | | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|
| <input checked="" type="checkbox"/> | 11a | <input type="checkbox"/> | 11b | <input type="checkbox"/> | 11c | <input type="checkbox"/> | 12 | <input type="checkbox"/> | 13 | <input type="checkbox"/> | 14 | <input type="checkbox"/> | 15 | <input type="checkbox"/> | 16 | <input type="checkbox"/> | 17 |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Florence Beller

Mailing Address 5101 Sunrise Hills Dr

City State Zip Code
Fair Oaks CA 95628

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2011

Transaction ID : 3030315

Amount of Each Receipt this Period
 100

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Ms. Joan Petty

Mailing Address 7 Jasmine Creek Drive

City State Zip Code
Corona DI Mar CA 92625

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2011

Transaction ID : 3030317

Amount of Each Receipt this Period
 50

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Ms. Davida A. Carvin

Mailing Address 63 Atlantic Ave. 10A

City State Zip Code
Boston MA 02110

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2011

Transaction ID : 3030584

Amount of Each Receipt this Period
 100

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1191 OF 2452 |
| | <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. Grace Flesche
Full Name (Last, First, Middle Initial)
Mailing Address 523 Pinehurst Boulevard
City Kalamazoo State MI Zip Code 49006
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 ▼ 0

Date of Receipt 07 / 20 / 2011
Transaction ID : 3030585
Amount of Each Receipt this Period 50
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

B. Ms. Nancy S. Rust
Full Name (Last, First, Middle Initial)
Mailing Address 18747 Ridgefield Rd. N W
City Shoreline State WA Zip Code 98177
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 ▼ 0

Date of Receipt 07 / 22 / 2011
Transaction ID : 3031638
Amount of Each Receipt this Period 100
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

C. Ms. Constance Sadek
Full Name (Last, First, Middle Initial)
Mailing Address 50 E. Hartsdale Avenue
City Hartsdale State NY Zip Code 10530
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 ▼ 0

Date of Receipt 07 / 22 / 2011
Transaction ID : 3031649
Amount of Each Receipt this Period 50
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1192 OF 2452 |
| | <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. Diane G. Faissler
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Atlantic Rd
 City Gloucester State MA Zip Code 01930
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2011
Transaction ID : 3031662
 Amount of Each Receipt this Period
 250
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Leah Horwitz
 Full Name (Last, First, Middle Initial)
 Mailing Address 305 Savage Farm Drive
 City Ithaca State NY Zip Code 14850
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2011
Transaction ID : 3032030
 Amount of Each Receipt this Period
 200
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Mrs. Patricia Colburn
 Full Name (Last, First, Middle Initial)
 Mailing Address 1559 Oakdale St.
 City Pasadena State CA Zip Code 91106
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2011
Transaction ID : 3032057
 Amount of Each Receipt this Period
 100
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1193 OF 2452 |
| | <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 Joy
Full Name (Last, First, Middle Initial)
Mailing Address 10041 Resmar Pl.
City La Mesa State CA Zip Code 91941
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 ▼ 0

Date of Receipt 07 / 25 / 2011
Transaction ID : 3032769
Amount of Each Receipt this Period 100
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

B. Dr. Margaret Hogan
Full Name (Last, First, Middle Initial)
Mailing Address 9434 N 125th Pl
City Scottsdale State AZ Zip Code 85259
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 ▼ 0

Date of Receipt 07 / 25 / 2011
Transaction ID : 3032772
Amount of Each Receipt this Period 25
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

C. Ms. Nancy Skinner Nordhoff
Full Name (Last, First, Middle Initial)
Mailing Address 835 Sixth Street
City Langley State WA Zip Code 98260
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 ▼ 0

Date of Receipt 07 / 25 / 2011
Transaction ID : 3032778
Amount of Each Receipt this Period 500
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1194 OF 2452 |
| | (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

A. Col. Billie M. Bobbitt
Full Name (Last, First, Middle Initial)

Mailing Address 5830 North Fountains Avenue
Apartment # 226

City Tucson State AZ Zip Code 85704

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 ▼ **0**

Date of Receipt
07 / 26 / 2011

Transaction ID : 3032963

Amount of Each Receipt this Period
500

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

B. 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 N/A Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
07 / 27 / 2011

Transaction ID : 3035043

Amount of Each Receipt this Period
200

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

C. Ms. Marion P. Harris
Full Name (Last, First, Middle Initial)

Mailing Address 11 Williams St

City Arlington State MA Zip Code 02476

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 ▼ **0**

Date of Receipt
07 / 26 / 2011

Transaction ID : 3035093

Amount of Each Receipt this Period
50

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1195 OF 2452 |
| <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. Louise Bockall
 Full Name (Last, First, Middle Initial)
 Mailing Address 34132 Village 34
 City Camarillo State CA Zip Code 93012
 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 **0**

Date of Receipt
 07 / 28 / 2011
Transaction ID : 3035464
 Amount of Each Receipt this Period
 25
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Leann McElroy
 Full Name (Last, First, Middle Initial)
 Mailing Address 2280 Dant Blvd
 City Reno State NV Zip Code 89509
 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 **0**

Date of Receipt
 07 / 28 / 2011
Transaction ID : 3035647
 Amount of Each Receipt this Period
 25
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Mr. Richard Ellegood
 Full Name (Last, First, Middle Initial)
 Mailing Address 1000 SW Vista Avenue # 919
 City Portland State OR Zip Code 97205
 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 **0**

Date of Receipt
 07 / 28 / 2011
Transaction ID : 3035674
 Amount of Each Receipt this Period
 50
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|---|------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1196 OF 2452 |
| <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. Sue Kilrain
Full Name (Last, First, Middle Initial)

Mailing Address 1800 Purdy Ave, #1002
Apt.1002

City Miami Beach State FL Zip Code 33139

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 ▼ **0**

Date of Receipt
07 / 30 / 2011

Transaction ID : 3035807

Amount of Each Receipt this Period
200

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

B. Mrs. Lucille Celia Behrens
Full Name (Last, First, Middle Initial)

Mailing Address 63 South Lilburn Drive

City Garnerville State NY Zip Code 10923

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 ▼ **0**

Date of Receipt
07 / 31 / 2011

Transaction ID : 3035816

Amount of Each Receipt this Period
20

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

C. Ms. Jean Woodruff
Full Name (Last, First, Middle Initial)

Mailing Address 5225 Wilson Lane, Apt 1123

City Mechanicsburg State PA Zip Code 17055

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 ▼ **0**

Date of Receipt
07 / 29 / 2011

Transaction ID : 3035899

Amount of Each Receipt this Period
50

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1197 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Mrs. Kathleen J. Bavelas
 Full Name (Last, First, Middle Initial)
 Mailing Address 56 Pratt Lane
 City Wolcott State CT Zip Code 06716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gateway C C Occupation retired but part-tim
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026120
 Amount of Each Receipt this Period **30**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Ms. Kimberly Perry
 Full Name (Last, First, Middle Initial)
 Mailing Address 665 S Skinker Blvd Apt. 23D
 City Saint Louis State MO Zip Code 63105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer solctia Occupation RETIRED ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022054
 Amount of Each Receipt this Period **100**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Shirley Lindquist
 Full Name (Last, First, Middle Initial)
 Mailing Address 6555 Parkpoint Way NE
 City Seattle State WA Zip Code 98115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation retired teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024232
 Amount of Each Receipt this Period **10**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1198 OF 2452 |
| <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. Laura D. Bruce
Full Name (Last, First, Middle Initial)
Mailing Address 9627 Sagamore Road

| | | |
|-----------------|-------------|-------------------|
| City Leawood | State KS | Zip Code 66206 |
|-----------------|-------------|-------------------|

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

| | |
|-------------------------|-------------------------------|
| Name of Employer N/A | Occupation retired teacher |
|-------------------------|-------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 06 / 2011

Transaction ID : 3024390

Amount of Each Receipt this Period
25

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

B. Mr. Leroy E. Walters
Full Name (Last, First, Middle Initial)
Mailing Address 265 Crest Ave Apt 2

| | | |
|----------------------|-------------|-------------------|
| City Belle Vernon | State PA | Zip Code 15012 |
|----------------------|-------------|-------------------|

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

| | |
|-------------------------|-------------------------------|
| Name of Employer N/A | Occupation RETIRED TEACHER |
|-------------------------|-------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : 3026245

Amount of Each Receipt this Period
50

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

C. Ms. Dorothy Nordness
Full Name (Last, First, Middle Initial)
Mailing Address 114 8th Street

| | | |
|-------------------|-------------|-------------------|
| City Ann Arbor | State MI | Zip Code 48103 |
|-------------------|-------------|-------------------|

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

| | |
|--|--------------------------------|
| Name of Employer Univ. of Mich/Self | Occupation Retired/Gardener |
|--|--------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : 3026170

Amount of Each Receipt this Period
15

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1199 OF 2452 |
| | <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 Orosz | | Date of Receipt MM / DD / YYYY 07 / 07 / 2011 Transaction ID : 3025313 |
| Mailing Address 1520 Estee Ave. | | Amount of Each Receipt this Period 25 Claire McCaskill Contributions |
| City Napa | State CA | Zip Code 94558 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer M-P Health Services | Occupation RN | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr. Randall Shields | | Date of Receipt MM / DD / YYYY 07 / 12 / 2011 Transaction ID : 3026806 |
| Mailing Address 1423 w. maple st. | | Amount of Each Receipt this Period 100 Claire McCaskill Contributions |
| City Kalamazoo | State MI | Zip Code 49008 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer self-employed | Occupation sales | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Karen Slevinske | | Date of Receipt MM / DD / YYYY 07 / 20 / 2011 Transaction ID : 3030939 |
| Mailing Address 1106 Second St. #498 | | Amount of Each Receipt this Period 10 Claire McCaskill Contributions |
| City Encinitas | State CA | Zip Code 92024 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer self | Occupation sales | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1200 OF 2452 |
| | <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 Boyle
Full Name (Last, First, Middle Initial)
Mailing Address 2264 Spring Creek Rd
City Decatur State GA Zip Code 30033
FEC ID number of contributing federal political committee. **C**
Name of Employer Primus Software Occupation SAP Consultant
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024165
Amount of Each Receipt this Period **30**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

B. Ms. Jeanne Elkins
Full Name (Last, First, Middle Initial)
Mailing Address 1537 Westminster Dr Apt. 112
City Naperville State IL Zip Code 60563
FEC ID number of contributing federal political committee. **C**
Name of Employer Argonne National Lab Occupation Scientist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 20 / 2011**
Transaction ID : 3030596
Amount of Each Receipt this Period **25**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

C. Ms. Jean A. Wolff
Full Name (Last, First, Middle Initial)
Mailing Address 10543 Garwood Pl
City Los Angeles State CA Zip Code 90024
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Sculptor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 18 / 2011**
Transaction ID : 3029417
Amount of Each Receipt this Period **200**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1201 OF 2452 |
| | <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. Barbara M. arum
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 Hill Rd
 City Accord State NY Zip Code 12404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation sculptor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 28 / 2011**
Transaction ID : 3035664
 Amount of Each Receipt this Period **100**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

B. Lawrence Tetenbaum
 Full Name (Last, First, Middle Initial)
 Mailing Address 38 Summit Ct
 City Plainview State NY Zip Code 11803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Petro Heating Inc Occupation Service Dispatcher
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024284
 Amount of Each Receipt this Period **5**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

C. Ms. Toby Coit
 Full Name (Last, First, Middle Initial)
 Mailing Address 119 Lafayette Street
 City Norwich State CT Zip Code 06360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self - Toby Coil Occupation SOCIAL WORK
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 21 / 2011**
Transaction ID : 3031655
 Amount of Each Receipt this Period **25**
 Claire McCaskill Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1202 OF 2452 |
| | <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. Leslee Pfaffmann
Full Name (Last, First, Middle Initial)
Mailing Address 30021 Pipers Lane
City Farmington Hills State MI Zip Code 48334
FEC ID number of contributing federal political committee. **C**
Name of Employer AVL North America, Inc Occupation Software Developer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024251
Amount of Each Receipt this Period **5**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

B. Philip Boyer
Full Name (Last, First, Middle Initial)
Mailing Address 1563 De Anza Way
City San Jose State CA Zip Code 95125
FEC ID number of contributing federal political committee. **C**
Name of Employer IBM Occupation Software engineer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 20 / 2011**
Transaction ID : 3030641
Amount of Each Receipt this Period **100**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

C. Ms. Sonia Vallianos
Full Name (Last, First, Middle Initial)
Mailing Address 15 Walker Street
City Somerville State MA Zip Code 02144
FEC ID number of contributing federal political committee. **C**
Name of Employer Foxboro Co. Occupation Supervisor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 19 / 2011**
Transaction ID : 3030306
Amount of Each Receipt this Period **100**
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1203 OF 2452 |
| | <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. Mr. Jim Perry
Full Name (Last, First, Middle Initial)
Mailing Address 2406 Tatnuck Ct
City Herndon State VA Zip Code 20171
FEC ID number of contributing federal political committee. **C**
Name of Employer International Display Systems Occupation Sys Admin
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 04 / 2011
Transaction ID : 3021925
Amount of Each Receipt this Period 80
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

B. Ms. Joyce Heran
Full Name (Last, First, Middle Initial)
Mailing Address 13608 S. Village Drive
City Tampa State FL Zip Code 33618
FEC ID number of contributing federal political committee. **C**
Name of Employer Hillsborough Co. Schools Occupation Teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 06 / 2011
Transaction ID : 3024651
Amount of Each Receipt this Period 20
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

C. Ms. Margaret T. Gelin
Full Name (Last, First, Middle Initial)
Mailing Address 105 Trowbridge Street, #4
City Cambridge State MA Zip Code 02138
FEC ID number of contributing federal political committee. **C**
Name of Employer Framingham, MA Occupation Teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 29 / 2011
Transaction ID : 3035901
Amount of Each Receipt this Period 250
Claire McCaskill Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1204 OF 2452 |
| | <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. Doris Brody

Mailing Address 15 Holly Lane

City Roslyn Heights State NY Zip Code 11577

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

Name of Employer Bisquene Travel Occupation Travel Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 08 / 2011**

Transaction ID : 3025634

Amount of Each Receipt this Period **100**

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 432 W Cattle Drive Trail

City Flagstaff State AZ Zip Code 86001

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

Name of Employer None Occupation unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 09 / 2011**

Transaction ID : 3025452

Amount of Each Receipt this Period **30**

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Mr. Neil Elliott

Mailing Address 3215 Cliff Drive

City Santa Barbara State CA Zip Code 93109

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

Name of Employer None Occupation Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 11 / 2011**

Transaction ID : 3026217

Amount of Each Receipt this Period **15**

Claire McCaskill Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1206 OF 2452 |
| | <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. Hedy M Ratner | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 05 / 2011 Transaction ID : 3023018 |
| Mailing Address 1960 Lincoln Park West #2301 | | Amount of Each Receipt this Period 50 Debbie Stabenow Contributions |
| City Chicago State IL Zip Code 60614 | [MEMO ITEM] MEMO | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Women's Business Development Center Occupation Administrator | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Jerry A. Ellis | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 06 / 2011 Transaction ID : 3024611 |
| Mailing Address PO Box 544 | | Amount of Each Receipt this Period 100 Debbie Stabenow Contributions |
| City Long Beach State WA Zip Code 98631 | [MEMO ITEM] MEMO | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Washington State Occupation Adminrator | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mrs. Susan S. Johnson | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 05 / 2011 Transaction ID : 3023058 |
| Mailing Address 1265 NW Heather Drive | | Amount of Each Receipt this Period 60 Debbie Stabenow Contributions |
| City Corvallis State OR Zip Code 97330 | [MEMO ITEM] MEMO | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Self Occupation Artist | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | |
|---|------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | 0.00 |

**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 1207 OF 2452 |
| | <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. Mrs. Bette S. Paris
 Full Name (Last, First, Middle Initial)
 Mailing Address 607 N. Arden Drive
 City Beverly Hills State CA Zip Code 90210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023102
 Amount of Each Receipt this Period **50**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Ms. E. Marianne Gabel
 Full Name (Last, First, Middle Initial)
 Mailing Address 49 forest ave.
 City Delaware State OH Zip Code 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self employed Occupation Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025432
 Amount of Each Receipt this Period **500**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Ms. Sue C Hansen
 Full Name (Last, First, Middle Initial)
 Mailing Address 6927 Fairmount Ave.
 City El Cerrito State CA Zip Code 94530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer State Occupation Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 10 / 2011**
Transaction ID : 3025512
 Amount of Each Receipt this Period **100**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1208 OF 2452 |
| | <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. Ann J. Remers
 Full Name (Last, First, Middle Initial)
 Mailing Address 5022 E. Calle Guebabi
 City Tuscon State AZ Zip Code 85718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 19 / 2011**
Transaction ID : 3030304
 Amount of Each Receipt this Period **100**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. John Auyong
 Full Name (Last, First, Middle Initial)
 Mailing Address 835 1/2 South Sycamore Avenue
 City Los Angeles State CA Zip Code 90036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Social Security Administration Occupation Attorney Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 03 / 2011**
Transaction ID : 3021681
 Amount of Each Receipt this Period **10**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Ms. Susan Winshall
 Full Name (Last, First, Middle Initial)
 Mailing Address 3818 Wabeek Lake Drive East
 City Bloomfield Hills State MI Zip Code 48302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation Attorney, retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024304
 Amount of Each Receipt this Period **100**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1209 OF 2452 |
| | <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

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Dr. Patricia L Dedert | | Date of Receipt MM / DD / YYYY 07 / 02 / 2011 |
| Mailing Address 800 Atkinson Circle | | Transaction ID : 3021797 |
| City Hillsborough | State NJ | Zip Code 08844 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 50 |
| Name of Employer ExxonMobil Research & Engineering Col | Occupation Chemist | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Helen Meola | | Date of Receipt MM / DD / YYYY 07 / 26 / 2011 |
| Mailing Address 255 Massachusetts Avenue Apartment 203 | | Transaction ID : 3035109 |
| City Boston | State MA | Zip Code 2115 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 250 |
| Name of Employer Brigham & Women's Hospital | Occupation Clerical | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Connie Clement | | Date of Receipt MM / DD / YYYY 07 / 25 / 2011 |
| Mailing Address PO Box 1454 | | Transaction ID : 3032768 |
| City Ponca City | State OK | Zip Code 74602 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 50 |
| Name of Employer USPS | Occupation Clerk | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1210 OF 2452 |
| <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. Margaret W. Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 9190 Brier Rd.
City La Mesa State CA Zip Code 91942
FEC ID number of contributing federal political committee. **C**
Name of Employer Grossmont College Occupation College Instructor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024607
Amount of Each Receipt this Period **50**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Mr. Kicab Castaneda-Mendez
Full Name (Last, First, Middle Initial)
Mailing Address 112 Rhododendron CT
City Chapel Hill State NC Zip Code 27517
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation consultant
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 02 / 2011**
Transaction ID : 3021793
Amount of Each Receipt this Period **25**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Ms. Joan Dolan Biblo
Full Name (Last, First, Middle Initial)
Mailing Address 8707 Riggs Lane # 4
City Overland Park State KS Zip Code 66212
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Consultant
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 12 / 2011**
Transaction ID : 3026783
Amount of Each Receipt this Period **50**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1211 OF 2452 |
| | <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. Amy Sherman Palladino
Full Name (Last, First, Middle Initial)
Mailing Address 15260 Ventura #1040

| | | |
|----------------------|-------------|-------------------|
| City Sherman Oaks | State CA | Zip Code 91403 |
|----------------------|-------------|-------------------|

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

| | |
|---|---|
| Name of Employer Warner Bros (Gilmore Girls) | Occupation Creator/Director/Producer |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 21 | / | 2011 |

Transaction ID : 3031658

Amount of Each Receipt this Period

| |
|------|
| 0000 |
|------|

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

B. Ms. Mary Schieffer
Full Name (Last, First, Middle Initial)
Mailing Address 3913 West Forest Home Avenue

| | | |
|-------------------|-------------|-------------------|
| City Milwaukee | State WI | Zip Code 53215 |
|-------------------|-------------|-------------------|

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

| | |
|--|-------------------------|
| Name of Employer Milwaukee Police Dept. | Occupation Detective |
|--|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 18 | / | 2011 |

Transaction ID : 3029423

Amount of Each Receipt this Period

| |
|----|
| 50 |
|----|

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

C. Dr. Stephanie A. Mercier
Full Name (Last, First, Middle Initial)
Mailing Address 6155-L Edsall Road

| | | |
|--------------------|-------------|-------------------|
| City Alexandria | State VA | Zip Code 22304 |
|--------------------|-------------|-------------------|

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

| | |
|-------------------------------------|-------------------------|
| Name of Employer U.S. Government | Occupation Economist |
|-------------------------------------|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 14 | / | 2011 |

Transaction ID : 3027417

Amount of Each Receipt this Period

| |
|-----|
| 100 |
|-----|

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1212 OF 2452 |
| | <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. Deborah Bulger
Full Name (Last, First, Middle Initial)
Mailing Address 1603 King Street
City Santa Cruz State CA Zip Code 95060
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Editor
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0**

Date of Receipt **07 / 22 / 2011**
Transaction ID : 3031647
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Ms. Corinne Orts Gunkle
Full Name (Last, First, Middle Initial)
Mailing Address 1610 Woodbridge Lane
City Center Valley State PA Zip Code 18034
FEC ID number of contributing federal political committee. **C**
Name of Employer Lucent Technologies Occupation Electrical Eng.
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022066
Amount of Each Receipt this Period **50**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Dr. Lisa M. Schwerdt
Full Name (Last, First, Middle Initial)
Mailing Address 5337 California Ave
City Bethel Park State PA Zip Code 15102
FEC ID number of contributing federal political committee. **C**
Name of Employer California Univ. of Penn. Occupation English Professor
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0**

Date of Receipt **07 / 22 / 2011**
Transaction ID : 3032351
Amount of Each Receipt this Period **10**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1213 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Mr. Ken Harstad
 Full Name (Last, First, Middle Initial)
 Mailing Address 12719 Shenley Street
 City Sylmar State CA Zip Code 91342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JPL Pasadena CA Occupation Engr.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2011
Transaction ID : 3026244
 Amount of Each Receipt this Period 200
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Ms. Tammy D. McLeod
 Full Name (Last, First, Middle Initial)
 Mailing Address 5428 E. Sanna Street
 City Paradise Valley State AZ Zip Code 85253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Arizona Public Service Occupation executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2011
Transaction ID : 3031026
 Amount of Each Receipt this Period 100
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Ms. Cynthia B. Hortin
 Full Name (Last, First, Middle Initial)
 Mailing Address 2096 Cynthia Drive
 City Tallahassee State FL Zip Code 32303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer unemployed Occupation family caregiver/hom
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024404
 Amount of Each Receipt this Period 50
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1214 OF 2452 |
| | <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. Catherine Wyler
Full Name (Last, First, Middle Initial)
Mailing Address 3917 Watson Place, NW

| | | |
|--------------------|-------------|-------------------|
| City Washington | State DC | Zip Code 20016 |
|--------------------|-------------|-------------------|

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

| | |
|---|--------------------------------|
| Name of Employer Catherine Wyler Prods. Inc. | Occupation Film/TV Producer |
|---|--------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 21 | / | 2011 |

Transaction ID : 3031984

Amount of Each Receipt this Period

| |
|-----|
| 200 |
|-----|

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

B. Ms. Irene McDonnell M Cahill
Full Name (Last, First, Middle Initial)
Mailing Address 657 Virginia Ave

| | | |
|----------------------|-------------|-------------------|
| City East Lansing | State MI | Zip Code 48823 |
|----------------------|-------------|-------------------|

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

| | |
|-------------------------------------|------------------------|
| Name of Employer City of Lansing | Occupation Forester |
|-------------------------------------|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 05 | / | 2011 |

Transaction ID : 3023074

Amount of Each Receipt this Period

| |
|----|
| 25 |
|----|

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

C. Ms. Shirley H. Wells
Full Name (Last, First, Middle Initial)
Mailing Address 114 Drawbridge PL

| | | |
|-----------------------|-------------|-------------------|
| City Fairfield Bay | State AR | Zip Code 72088 |
|-----------------------|-------------|-------------------|

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

| | |
|--------------------------|--------------------------|
| Name of Employer none | Occupation Home maker |
|--------------------------|--------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 11 | / | 2011 |

Transaction ID : 3026178

Amount of Each Receipt this Period

| |
|----|
| 25 |
|----|

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1215 OF 2452 |
| | <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. Mrs. Martha H. Talbot | | Date of Receipt MM / DD / YYYY 07 / 07 / 2011 |
| Mailing Address 6656 Chilton Court | | Transaction ID : 3025214 |
| City McLean | State VA | Zip Code 22101 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500 | |
| Name of Employer n/a | Occupation Homemaker | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Ms. Jenny Bateman Mudge | | Date of Receipt MM / DD / YYYY 07 / 22 / 2011 |
| Mailing Address 2614 Ellentown Road | | Transaction ID : 3032483 |
| City La Jolla | State CA | Zip Code 92037 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500 | |
| Name of Employer n/a | Occupation Homemaker | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Ms. Linda Hartig | | Date of Receipt MM / DD / YYYY 07 / 20 / 2011 |
| Mailing Address 180 Otter Rock | | Transaction ID : 3030581 |
| City Greenwich | State CT | Zip Code 06830 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 500 | |
| Name of Employer n/a | Occupation Homemaker-retired | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1216 OF 2452 |
| | <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. 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 n/a Occupation Hospice Physician
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 28 / 2011**
Transaction ID : 3035677
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Ms. Mary Lou Brown
Full Name (Last, First, Middle Initial)
Mailing Address 139 Via Baja
City Ventura State CA Zip Code 93003
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation housewife
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 15 / 2011**
Transaction ID : 3029046
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Ms. Louise M. Torgerson
Full Name (Last, First, Middle Initial)
Mailing Address 3400 E Superior St
City Seattle State WA Zip Code 98122
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation housewife
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 18 / 2011**
Transaction ID : 3029414
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1217 OF 2452 |
| | <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. Susie Langdon Kass
Full Name (Last, First, Middle Initial)
Mailing Address 25 Vista Verde Court
City San Francisco State CA Zip Code 94131
FEC ID number of contributing federal political committee. **C**
Name of Employer UC-San Francisco Occupation Instructor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024600
Amount of Each Receipt this Period **250**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Ms. Sally Maier
Full Name (Last, First, Middle Initial)
Mailing Address 2519 8th Street
City Livermore State CA Zip Code 94550
FEC ID number of contributing federal political committee. **C**
Name of Employer Las Positas College Occupation Instructor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 14 / 2011**
Transaction ID : 3027412
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Ms. Catherine Hodgman Helm
Full Name (Last, First, Middle Initial)
Mailing Address 227 So. Windsor Blvd.
City Los Angeles State CA Zip Code 90004
FEC ID number of contributing federal political committee. **C**
Name of Employer self-employed Occupation lawyer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022043
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1218 OF 2452 |
| | <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. Linda Roberts Zinn
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 S. Steele St # 54
 City Denver State CO Zip Code 80209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Lawyer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 14 / 2011**
Transaction ID : 3027413
 Amount of Each Receipt this Period **100**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Ms. Alice Wick Hall
 Full Name (Last, First, Middle Initial)
 Mailing Address 273 Upland Road
 City Cambridge State MA Zip Code 02140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Wekesley College Occupation Librarian
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024599
 Amount of Each Receipt this Period **250**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Ms. Bonnie W. Eisenfeld
 Full Name (Last, First, Middle Initial)
 Mailing Address 2031 Locust Street, Apt. 402
 City Philadelphia State PA Zip Code 19103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Market Research Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024639
 Amount of Each Receipt this Period **50**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

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|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 1219 OF 2452 |
| | <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. Clare Vincent | | Date of Receipt MM / DD / YYYY 07 / 22 / 2011 |
| Mailing Address 326 East 85th Street, Apt G | | Transaction ID : 3031644 |
| City New York | State NY | Zip Code 10028 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50 | |
| Name of Employer Metro. Museum Of Art | Occupation Museum Curator | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Ms. Lois E. Gullerud | | Date of Receipt MM / DD / YYYY 07 / 15 / 2011 |
| Mailing Address 1208 W. Daniel | | Transaction ID : 3029052 |
| City Champaign | State IL | Zip Code 61821 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100 | |
| Name of Employer Self | Occupation Musician | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Ms. Joan Creigh Little | | Date of Receipt MM / DD / YYYY 07 / 01 / 2011 |
| Mailing Address 11986 Alpine Terrace | | Transaction ID : 3021784 |
| City San Diego | State CA | Zip Code 92128 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 10 | |
| Name of Employer none | Occupation none | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1220 OF 2452 |
| | <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 P Wolf
Full Name (Last, First, Middle Initial)

Mailing Address 2465 SW Timberline Dr

City Portland State OR Zip Code 97225

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 ▼ **0**

Date of Receipt **07 / 10 / 2011**

Transaction ID : 3025499

Amount of Each Receipt this Period **50**

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

B. Ms. Elizabeth B. Flanagan
Full Name (Last, First, Middle Initial)

Mailing Address 844 dorian rd

City Westfield State NJ Zip Code 07090

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

Name of Employer na Occupation not employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 21 / 2011**

Transaction ID : 3031640

Amount of Each Receipt this Period **100**

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

C. Ms. Judith Krantz
Full Name (Last, First, Middle Initial)

Mailing Address 166 Groverton Pl

City Los Angeles State CA Zip Code 90077

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

Name of Employer Self Occupation Novelist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 26 / 2011**

Transaction ID : 3035890

Amount of Each Receipt this Period **2500**

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1221 OF 2452 |
| | <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. Mrs. Deanna K. Celico | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2011 Transaction ID : 3022090 |
| Mailing Address 37 Butternut Drive | | Amount of Each Receipt this Period 10 Debbie Stabenow Contributions |
| City North Kingstown State RI Zip Code 02852 | FEC ID number of contributing federal political committee. C | |
| Name of Employer Fabrig Gallery Occupation Owner | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] MEMO |
| Aggregate Year-to-Date ▼ 0 | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Ms. Joy Silver | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 15 / 2011 Transaction ID : 3029040 |
| Mailing Address 1059 W Skylark Drive | | Amount of Each Receipt this Period 100 Debbie Stabenow Contributions |
| City Palatine State IL Zip Code 60067 | FEC ID number of contributing federal political committee. C | |
| Name of Employer Drs. Bedingfield and Rosen Occupation Pediatrician | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] MEMO |
| Aggregate Year-to-Date ▼ 0 | | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Ms. Mildred Weissman | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 06 / 2011 Transaction ID : 3024289 |
| Mailing Address 81 Manursing Way | | Amount of Each Receipt this Period 1000 Debbie Stabenow Contributions |
| City Rye State NY Zip Code 10580 | FEC ID number of contributing federal political committee. C | |
| Name of Employer Retired Occupation Philanthropist | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] MEMO |
| Aggregate Year-to-Date ▼ 0 | | |

| | |
|---|------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | 0.00 |

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

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| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 1222 OF 2452 |
| | <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. Cheryl C. Farmer
Full Name (Last, First, Middle Initial)

Mailing Address 214 N. Huron Street, #1

City Ypsilanti State MI Zip Code 48197

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

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 15 / 2011
Transaction ID : 3029039

Amount of Each Receipt this Period 100

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

B. Ms. Elizabeth Barry
Full Name (Last, First, Middle Initial)

Mailing Address 26 Demeigh Hill Circle

City Baltimore State MD Zip Code 21210

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

Name of Employer University of Maryland Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 18 / 2011
Transaction ID : 3029419

Amount of Each Receipt this Period 125

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

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 GA Health Sciencea Univ Occupation Physician/educator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 21 / 2011
Transaction ID : 3032009

Amount of Each Receipt this Period 100

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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 1223 OF 2452 |
| | <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. Mary H. DuPree
 Full Name (Last, First, Middle Initial)
 Mailing Address 320 N. Adams
 City Moscow State ID Zip Code 83843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Idaho Occupation Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023013
 Amount of Each Receipt this Period **100**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Ms. Jean Stapleton
 Full Name (Last, First, Middle Initial)
 Mailing Address 3232 Philo St.
 City Los Angeles State CA Zip Code 90064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer East Los Angeles College Occupation Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 10 / 2011**
Transaction ID : 3025518
 Amount of Each Receipt this Period **50**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Dr. Britt Hedman
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 Peter Couatts Circle
 City Stanford State CA Zip Code 94305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Stanford University Occupation PROFESSOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025636
 Amount of Each Receipt this Period **250**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1224 OF 2452 |
| | <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. Esther M. Conwell
 Full Name (Last, First, Middle Initial)
 Mailing Address 340 Pelham Road
 City Rochester State NY Zip Code 14610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer univ of rochester Occupation PROFESSOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 20 / 2011**
Transaction ID : 3030592
 Amount of Each Receipt this Period **200**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Ms. Donna Bahry Bartlett
 Full Name (Last, First, Middle Initial)
 Mailing Address 628 Fairway Road
 City State College State PA Zip Code 16803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Penn State University Occupation Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 26 / 2011**
Transaction ID : 3035103
 Amount of Each Receipt this Period **100**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Dr. Marion Taylor Taylor Baer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3636 Corinth Ave
 City Los Angeles State CA Zip Code 90066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer USC Occupation Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 28 / 2011**
Transaction ID : 3035689
 Amount of Each Receipt this Period **25**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1225 OF 2452 |
| | <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. Gisa Indenbaum | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 |
| Mailing Address 41 W 86th St 12E | | Transaction ID : 3024343 |
| City New York | State NY | Zip Code 10024 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100 |
| Name of Employer Self-Employed | Occupation Psychologist | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Dr. Judith S. McCleary | | Date of Receipt MM / DD / YYYY 07 / 08 / 2011 |
| Mailing Address 2680 Natoma Street | | Transaction ID : 3025627 |
| City Miami | State FL | Zip Code 33133 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100 |
| Name of Employer Self | Occupation Psychologist | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Dr. Wendy Santin Rapaport | | Date of Receipt MM / DD / YYYY 07 / 11 / 2011 |
| Mailing Address 19372cedar glen dr | | Transaction ID : 3026164 |
| City Boca Raton | State FL | Zip Code 33434 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 10 |
| Name of Employer Self | Occupation Psychologist | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1226 OF 2452 |
| | <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. Dr. Lloyd Meadow
Full Name (Last, First, Middle Initial)
Mailing Address 355 Oak Park Drive
City San Francisco State CA Zip Code 94131
FEC ID number of contributing federal political committee. **C**
Name of Employer self employed Occupation psychologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0**

Date of Receipt **07 / 12 / 2011**
Transaction ID : 3027124
Amount of Each Receipt this Period **50**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Ms. Leslie Hefner
Full Name (Last, First, Middle Initial)
Mailing Address 424 Little Lake Drive Apt. 33
City Ann Arbor State MI Zip Code 48103
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Psychologist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0**

Date of Receipt **07 / 15 / 2011**
Transaction ID : 3029045
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Ms. Dorothy Reichardt
Full Name (Last, First, Middle Initial)
Mailing Address 47 Kendal Dr
City Kennett Square State PA Zip Code 19348
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Psychotherapist
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0**

Date of Receipt **07 / 18 / 2011**
Transaction ID : 3029428
Amount of Each Receipt this Period **25**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1227 OF 2452 |
| | (check only one) |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Martha Schoenemann
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 216

| | | |
|----------------|-------------|------------------|
| City Pawlet | State VT | Zip Code 5761 |
|----------------|-------------|------------------|

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

| | |
|--|---------------------------|
| Name of Employer Bob Schoenemann RE Service | Occupation Real Estate |
|--|---------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 26 | | 2011 |

Transaction ID : 3035097

Amount of Each Receipt this Period

| |
|----|
| 50 |
|----|

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

B. Ms. Susanne M. Yokel
Full Name (Last, First, Middle Initial)
Mailing Address 8208 Fenway Road

| | | |
|------------------|-------------|-------------------|
| 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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 01 | | 2011 |

Transaction ID : 3021820

Amount of Each Receipt this Period

| |
|----|
| 25 |
|----|

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

C. Ms. Antoinette B. D`Oronzio
Full Name (Last, First, Middle Initial)
Mailing Address 2905 W. Fountain Blvd.

| | | |
|---------------|-------------|-------------------|
| City Tampa | State FL | Zip Code 33609 |
|---------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 01 | | 2011 |

Transaction ID : 3022068

Amount of Each Receipt this Period

| |
|----|
| 50 |
|----|

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1228 OF 2452 |
| | <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. Margret Jacoby

Mailing Address 912 Blossom Drive

City Santa Clara State CA Zip Code 95050

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2011

Transaction ID : 3022079

Amount of Each Receipt this Period
100

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Ms. Karen Beetham

Mailing Address 5234 Nobis Ct.

City Davenport State IA Zip Code 52802

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2011

Transaction ID : 3022096

Amount of Each Receipt this Period
100

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 1919 Chestnut Street, # 917

City Philadelphia State PA Zip Code 19103

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 05 / 2011

Transaction ID : 3023068

Amount of Each Receipt this Period
15

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1229 OF 2452 |
| | <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. Gayle I. Moore | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 3115 Mauricia Avenue | | Transaction ID : 3023124 |
| City Santa Clara | State CA | Zip Code 95051 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25 |
| Name of Employer REQUESTED | Occupation REQUESTED | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Anne Pinkerton | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 800 Kimberton Rd Apt J3 | | Transaction ID : 3023134 |
| City Phoenixville | State PA | Zip Code 19460 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 10 |
| Name of Employer REQUESTED | Occupation REQUESTED | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Judith Strode | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 33 Hidden Valley Ln. | | Transaction ID : 3023143 |
| City Rogue River | State OR | Zip Code 97537 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 15 |
| Name of Employer REQUESTED | Occupation REQUESTED | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1230 OF 2452 |
| <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. Tena Rosner
Full Name (Last, First, Middle Initial)
Mailing Address 2935 Brighton Rd.
City Cleveland State OH Zip Code 44120
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 **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023148
Amount of Each Receipt this Period **15**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Mrs. Julie G. Lowenberg
Full Name (Last, First, Middle Initial)
Mailing Address 5321 Drane Drive
City Dallas State TX Zip Code 75209
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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024606
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Mr. Tony Wong
Full Name (Last, First, Middle Initial)
Mailing Address 3016 Kahako Place
City Kailua State HI Zip Code 96734
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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024643
Amount of Each Receipt this Period **30**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1231 OF 2452 |
| | <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. Dorothea Batchelder
 Full Name (Last, First, Middle Initial)
 Mailing Address 1558 Philip Dr
 City Healdsburg State CA Zip Code 95448
 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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024646
 Amount of Each Receipt this Period
50
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Ms. Nancy G. Appling
 Full Name (Last, First, Middle Initial)
 Mailing Address 2647 Isabelle Avenue
 City San Mateo State CA Zip Code 94403
 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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024653
 Amount of Each Receipt this Period
100
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Ms. Cheryl Ziegenfuss
 Full Name (Last, First, Middle Initial)
 Mailing Address 1036 Woodland Dr.
 City Sunbury State PA Zip Code 17801
 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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024665
 Amount of Each Receipt this Period
25
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1232 OF 2452 |
| | <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. Mr. Frederick E. Ziegler
 Full Name (Last, First, Middle Initial)
 Mailing Address 68 Edgemere Rd.
 City Hamden State CT Zip Code 06517
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024667
 Amount of Each Receipt this Period
 100
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Mr. Thomas Lovejoy
 Full Name (Last, First, Middle Initial)
 Mailing Address 8526 Georgetown Pike
 City McLean State VA Zip Code 22102
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2011
Transaction ID : 3025659
 Amount of Each Receipt this Period
 100
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Ms. Virginia Stallings Bell
 Full Name (Last, First, Middle Initial)
 Mailing Address 1303 Hillcrest Dr.
 City Blacksburg State VA Zip Code 24060
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2011
Transaction ID : 3025669
 Amount of Each Receipt this Period
 30
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1233 OF 2452 |
| | <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. Nancy Lincoln
 Full Name (Last, First, Middle Initial)
 Mailing Address 43 Hedge Rd
 City Brookline State MA Zip Code 02445
 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 **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2011
Transaction ID : 3026159
 Amount of Each Receipt this Period
 50
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Muriel Tuteur
 Full Name (Last, First, Middle Initial)
 Mailing Address 2093 Ronda Granada Unit A
 City Laguna Woods State CA Zip Code 92637
 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 **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2011
Transaction ID : 3026183
 Amount of Each Receipt this Period
 25
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

c. Ms. Amy Crofts
 Full Name (Last, First, Middle Initial)
 Mailing Address 605 E Court St
 City Viroqua State WI Zip Code 54665
 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 **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2011
Transaction ID : 3026189
 Amount of Each Receipt this Period
 10
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1234 OF 2452 |
| | (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. Lili Townsend
Full Name (Last, First, Middle Initial)
Mailing Address 3288 Waileia Place
City Waileia State HI Zip Code 96753
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 **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026233
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Ms. Roberta M. Block
Full Name (Last, First, Middle Initial)
Mailing Address 54 Cornwall Ln.
City Port Washington State NY Zip Code 11050
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 **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026249
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

c. Ms. Sally Goren
Full Name (Last, First, Middle Initial)
Mailing Address 215 Pin Oak Drive
City Wilmette State IL Zip Code 60091
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 **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026251
Amount of Each Receipt this Period **25**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1235 OF 2452 |
| | (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. Kay Blackburn
Full Name (Last, First, Middle Initial)
Mailing Address 78585 Vista Del Fuente
City Indian Wells State CA Zip Code 92210
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 0

Date of Receipt 07 / 11 / 2011
Transaction ID : 3026258
Amount of Each Receipt this Period 100
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Ms. Jeanne D. Feldman
Full Name (Last, First, Middle Initial)
Mailing Address 18655 W. Bernardo Drive # 468
City San Diego State CA Zip Code 92127
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 0

Date of Receipt 07 / 12 / 2011
Transaction ID : 3026772
Amount of Each Receipt this Period 50
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Ms. Dorothy Amato
Full Name (Last, First, Middle Initial)
Mailing Address 22149 Kensington Street
City Taylor State MI Zip Code 48180
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 0

Date of Receipt 07 / 12 / 2011
Transaction ID : 3026776
Amount of Each Receipt this Period 100
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1236 OF 2452 |
| | <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. Pearl Spiro
 Full Name (Last, First, Middle Initial)
 Mailing Address 62 New York Avenue
 City Congers State NY Zip Code 10920
 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 **0**

Date of Receipt **07 / 12 / 2011**
Transaction ID : 3026814
 Amount of Each Receipt this Period **50**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Ms. Jill Bogard
 Full Name (Last, First, Middle Initial)
 Mailing Address 2755 Macomb Street NW Apt. 405
 City Washington State DC Zip Code 20008
 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 **0**

Date of Receipt **07 / 13 / 2011**
Transaction ID : 3027295
 Amount of Each Receipt this Period **25**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Ms. Catherine L. Fickes
 Full Name (Last, First, Middle Initial)
 Mailing Address 7092 Winding Trl.
 City Brighton State MI Zip Code 48116
 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 **0**

Date of Receipt **07 / 14 / 2011**
Transaction ID : 3027427
 Amount of Each Receipt this Period **30**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1237 OF 2452 |
| | (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. Aase Loescher | | Date of Receipt MM / DD / YYYY 07 / 15 / 2011 |
| Mailing Address 2661 E. Fair Oaks Lane | | Transaction ID : 3029058 |
| City Bloomington | State IN | Zip Code 47401 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100 |
| Name of Employer REQUESTED | Occupation REQUESTED | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Mrs. Irma S. Samek | | Date of Receipt MM / DD / YYYY 07 / 18 / 2011 |
| Mailing Address 6568 Kings Creek Ter | | Transaction ID : 3029432 |
| City Boynton Beach | State FL | Zip Code 33437 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50 |
| Name of Employer REQUESTED | Occupation REQUESTED | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mr. William Stockard | | Date of Receipt MM / DD / YYYY 07 / 18 / 2011 |
| Mailing Address 2640 E Cardella Rd | | Transaction ID : 3029579 |
| City Merced | State CA | Zip Code 95340 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 60 |
| Name of Employer REQUESTED | Occupation REQUESTED | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1238 OF 2452 |
| | (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

A. Mrs. Roslyn Levin
Full Name (Last, First, Middle Initial)

Mailing Address 4092 Penshurst Pike

City Sarasota State FL Zip Code 34235

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2011

Transaction ID : 3030302

Amount of Each Receipt this Period
 100

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

B. Ms. Joan Kirsner
Full Name (Last, First, Middle Initial)

Mailing Address 6 Escalon Drive

City Mill Valley State CA Zip Code 94941

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2011

Transaction ID : 3030320

Amount of Each Receipt this Period
 50

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

C. Ms. Mildred Hedrick
Full Name (Last, First, Middle Initial)

Mailing Address 2135 Frederick Avenue

City Kalamazoo State MI Zip Code 49008

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2011

Transaction ID : 3030322

Amount of Each Receipt this Period
 200

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1239 OF 2452 |
| | <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. Merrilee A. Cate

Mailing Address 4505 N. O'Connor Road

City Irving State TX Zip Code 75062

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 ▼ **0**

Date of Receipt
07 / 19 / 2011

Transaction ID : 3030323

Amount of Each Receipt this Period
25

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Ms. Virginia M. Krall

Mailing Address 3038 SE 21st Street

City Gresham State OR Zip Code 97080

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 ▼ **0**

Date of Receipt
07 / 20 / 2011

Transaction ID : 3030587

Amount of Each Receipt this Period
50

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Ms. Margaret S. Lane

Mailing Address 753 W Market Street Apt. 406

City Akron State OH Zip Code 44303

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 ▼ **0**

Date of Receipt
07 / 20 / 2011

Transaction ID : 3030597

Amount of Each Receipt this Period
7.5

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1240 OF 2452 |
| | <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. Sue Fishman
Full Name (Last, First, Middle Initial)
Mailing Address 2012 Ardmore Avenue
City Hermosa Beach State CA Zip Code 90254
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 **0**

Date of Receipt **07 / 21 / 2011**
Transaction ID : 3031660
Amount of Each Receipt this Period **25**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Mackie Walker
Full Name (Last, First, Middle Initial)
Mailing Address 530 Whiskey Rd.
City Aiken State SC Zip Code 29801
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 **0**

Date of Receipt **07 / 21 / 2011**
Transaction ID : 3031665
Amount of Each Receipt this Period **25**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Ms. Helen B Lee
Full Name (Last, First, Middle Initial)
Mailing Address 12551 Sunbreak Way Ne
City Redmond State WA Zip Code 98053
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 **0**

Date of Receipt **07 / 21 / 2011**
Transaction ID : 3031989
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1241 OF 2452 |
| | <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. Ellen Bell
Full Name (Last, First, Middle Initial)
Mailing Address 1213 Oak Bluff Court
City Westerville State OH Zip Code 43081
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 **0**

Date of Receipt **07 / 25 / 2011**
Transaction ID : 3032774
Amount of Each Receipt this Period **25**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Ms. Joan M. Scott
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 307
City Creston State CA Zip Code 93432
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 **0**

Date of Receipt **07 / 25 / 2011**
Transaction ID : 3032780
Amount of Each Receipt this Period **30**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Ms. Barbara G. Svetkovich
Full Name (Last, First, Middle Initial)
Mailing Address 2190 E Calle Alegre
City Yuma State AZ Zip Code 85365
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 **0**

Date of Receipt **07 / 25 / 2011**
Transaction ID : 3032782
Amount of Each Receipt this Period **50**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1242 OF 2452 |
| | <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. Madeleine G. Kalb | | Date of Receipt MM / DD / YYYY 07 / 26 / 2011 |
| Mailing Address 100 Oxford Street | | Transaction ID : 3035108 |
| City Chevy Chase | State MD | Zip Code 20815 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 100 |
| Name of Employer REQUESTED | Occupation REQUESTED | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Mr. Harold Mills | | Date of Receipt MM / DD / YYYY 07 / 26 / 2011 |
| Mailing Address 12 Oakland Terrace | | Transaction ID : 3035111 |
| City Maplewood | State NJ | Zip Code 7040 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 10 |
| Name of Employer REQUESTED | Occupation REQUESTED | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Claire Mandeville | | Date of Receipt MM / DD / YYYY 07 / 28 / 2011 |
| Mailing Address 91 Kitchell Lake Drive | | Transaction ID : 3035469 |
| City West Milford | State NJ | Zip Code 07480 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 5 |
| Name of Employer REQUESTED | Occupation REQUESTED | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1243 OF 2452 |
| | <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. Beatrice Storr
Full Name (Last, First, Middle Initial)
Mailing Address 1416 Clover Ct.
City Midland State MI Zip Code 48640
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 **0**

Date of Receipt **07 / 29 / 2011**
Transaction ID : 3035910
Amount of Each Receipt this Period **30**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Ms. Gayle A. Kaplan
Full Name (Last, First, Middle Initial)
Mailing Address 5929 Walnut Dr
City Minneapolis State MN Zip Code 55436
FEC ID number of contributing federal political committee. **C**
Name of Employer Business Dynamics Inc. Occupation Research Consultant
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024605
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Richard E Kronauer
Full Name (Last, First, Middle Initial)
Mailing Address 13811 E Langtry Ln
City Tucson State AZ Zip Code 85747
FEC ID number of contributing federal political committee. **C**
Name of Employer Harvard Univ Occupation Research Prof
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023155
Amount of Each Receipt this Period **50**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1244 OF 2452 |
| | <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. Dorothy Weinstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 2818 N. 46 Ave. K-492
 City Hollywood State FL Zip Code 33021
 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 ▼ 0

Date of Receipt 07 / 01 / 2011
Transaction ID : 3021745
 Amount of Each Receipt this Period 50
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Ms. Eleanor Weinstock
 Full Name (Last, First, Middle Initial)
 Mailing Address 525 South Flagler Drive
 City West Palm Beach State FL Zip Code 33401
 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 ▼ 0

Date of Receipt 07 / 01 / 2011
Transaction ID : 3021749
 Amount of Each Receipt this Period 100
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Ms. Elaine Galinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 7919 Prospect Pl
 City La Jolla State CA Zip Code 92037
 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 ▼ 0

Date of Receipt 07 / 01 / 2011
Transaction ID : 3021757
 Amount of Each Receipt this Period 100
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1245 OF 2452 |
| | <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. Karen J. Keefer
Full Name (Last, First, Middle Initial)
Mailing Address 1720 Valota Road
City Redwood City State CA Zip Code 94061
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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3021772
Amount of Each Receipt this Period **75**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Ms. Myra Ramos
Full Name (Last, First, Middle Initial)
Mailing Address 2877 N. Nugent Rd. M-1
City Lummi Island State WA Zip Code 98262
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 **0**

Date of Receipt **07 / 02 / 2011**
Transaction ID : 3021846
Amount of Each Receipt this Period **20**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Dr. Michael Litt
Full Name (Last, First, Middle Initial)
Mailing Address 92 Wheatherstone Place
City Lake Oswego State OR Zip Code 97035
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 **0**

Date of Receipt **07 / 04 / 2011**
Transaction ID : 3021919
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1246 OF 2452 |
| | <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. Ellanor Malinowski
Full Name (Last, First, Middle Initial)
Mailing Address 13 Peacock Court
City San Rafael State CA Zip Code 94901
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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022050
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Ms. Eleanor B. Silsby
Full Name (Last, First, Middle Initial)
Mailing Address 65 South Street
City Granby State MA Zip Code 01033
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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022069
Amount of Each Receipt this Period **25**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Ms. Connie Ferguson
Full Name (Last, First, Middle Initial)
Mailing Address 525 S. Burdick St., Apt. 4101
City Kalamazoo State MI Zip Code 49007
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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022092
Amount of Each Receipt this Period **35**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1247 OF 2452 |
| | <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. Ruth Havighurst Neff
 Full Name (Last, First, Middle Initial)
 Mailing Address 1045 4th St
 City Whitefish State MT Zip Code 59937
 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 ▼ 0

Date of Receipt
 07 / 05 / 2011
Transaction ID : 3023012
 Amount of Each Receipt this Period 100
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Ms. Jan Flapan
 Full Name (Last, First, Middle Initial)
 Mailing Address 123 W. Oak St. #N Unit N
 City Chicago State IL Zip Code 60610
 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 ▼ 0

Date of Receipt
 07 / 05 / 2011
Transaction ID : 3023015
 Amount of Each Receipt this Period 500
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Ms. Ruth I. Kunin
 Full Name (Last, First, Middle Initial)
 Mailing Address 470 West End Avenue Apartment 6A
 City New York State NY Zip Code 10024
 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 ▼ 0

Date of Receipt
 07 / 05 / 2011
Transaction ID : 3023026
 Amount of Each Receipt this Period 100
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

| | |
|---|------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1248 OF 2452 |
| | (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. Emily R Hart
Full Name (Last, First, Middle Initial)
Mailing Address 1549 Markham Rd.
City Fayetteville State AR Zip Code 72701
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 ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023035
Amount of Each Receipt this Period 50
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Mr. John S. Harding
Full Name (Last, First, Middle Initial)
Mailing Address 231 Savage Farm Dr
City Ithaca State NY Zip Code 14850
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 ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023037
Amount of Each Receipt this Period 250
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Ms. Priscilla Klomprens
Full Name (Last, First, Middle Initial)
Mailing Address 9131 SW 19 St
City Miami State FL Zip Code 33165
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 ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023040
Amount of Each Receipt this Period 100
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1249 OF 2452 |
| <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. Gertrude K. Meyers
Full Name (Last, First, Middle Initial)
Mailing Address 1240 Colonial Dr.
City Baton Rouge State LA Zip Code 70806
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 ▼ **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023041
Amount of Each Receipt this Period **35**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Ms. Rose M. Laffoon
Full Name (Last, First, Middle Initial)
Mailing Address 20033 Greenwood Avenue N.
City Shoreline State WA Zip Code 98133
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 ▼ **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023046
Amount of Each Receipt this Period **50**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Ms. Jean J. Robinson
Full Name (Last, First, Middle Initial)
Mailing Address 9840 S Pulaski Road # 321
City Oak Lawn State IL Zip Code 60453
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 ▼ **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023054
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1250 OF 2452 |
| | <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 Colucci
Full Name (Last, First, Middle Initial)
Mailing Address 7155 Hillside Drive

| | | |
|---|-------------------------------|-------------------|
| City Clarkston | State MI | Zip Code 48346 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

Date of Receipt
MM / DD / YYYY
07 / 05 / 2011
Transaction ID : 3023071

Amount of Each Receipt this Period
200

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

B. Ms. Susan Chase
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 311

| | | |
|---|-------------------------------|-------------------|
| City Andover | State NH | Zip Code 03216 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

Date of Receipt
MM / DD / YYYY
07 / 05 / 2011
Transaction ID : 3023091

Amount of Each Receipt this Period
100

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

C. Ms. Jane Walsh Gralen
Full Name (Last, First, Middle Initial)
Mailing Address 42 Durham Court

| | | |
|---|-------------------------------|-------------------|
| City Burr Ridge | State IL | Zip Code 60527 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

Date of Receipt
MM / DD / YYYY
07 / 05 / 2011
Transaction ID : 3023095

Amount of Each Receipt this Period
75

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1251 OF 2452 |
| | <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. Mrs. Janet K. Hurd
Full Name (Last, First, Middle Initial)
Mailing Address 17 Paddock Lane
City Williston State VT Zip Code 05495
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 ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023105
Amount of Each Receipt this Period 100
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Ms. Pat Lewis
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 675
City South Beach State OR Zip Code 97366
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 ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023110
Amount of Each Receipt this Period 50
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Ms. Sherry L. Haagenon
Full Name (Last, First, Middle Initial)
Mailing Address 1112 S. Rio Vista Blvd.
City Fort Lauderdale State FL Zip Code 33316
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 ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023122
Amount of Each Receipt this Period 50
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1253 OF 2452 |
| | <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

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Ms. Elizabeth A. Fimbres | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 Transaction ID : 3024325 |
| Mailing Address 5820 N Pontatoc Road | | Amount of Each Receipt this Period 75 Debbie Stabenow Contributions |
| City Tucson | State AZ | Zip Code 85718 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer N/A | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Betty M. Twarog | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 Transaction ID : 3024333 |
| Mailing Address 54 Middle Road | | Amount of Each Receipt this Period 100 Debbie Stabenow Contributions |
| City Edgecomb | State ME | Zip Code 04556 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Phyllis W. Leslie | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 Transaction ID : 3024337 |
| Mailing Address 101 Rampart Circle | | Amount of Each Receipt this Period 30 Debbie Stabenow Contributions |
| City Fairfield Bay | State AR | Zip Code 72088 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1254 OF 2452 |
| | <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. Marilyn S. Minto
 Full Name (Last, First, Middle Initial)
 Mailing Address 154 Beach Park Blvd.
 City Foster City State CA Zip Code 94404
 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 **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024362
 Amount of Each Receipt this Period
 30
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Ms. Carolyn Ann A Legg
 Full Name (Last, First, Middle Initial)
 Mailing Address 853 Washington St.
 City Woodstock State IL Zip Code 60098
 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 **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024400
 Amount of Each Receipt this Period
 50
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Beltzer Murray
 Full Name (Last, First, Middle Initial)
 Mailing Address 21230 23rd Ave
 City Bayside State NY Zip Code 11360
 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 **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024456
 Amount of Each Receipt this Period
 10
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

| | |
|---|------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1255 OF 2452 |
| | <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. Gloria J. Fulcher
Full Name (Last, First, Middle Initial)
Mailing Address 2925 Roanoke Ct
City Bakersfield State CA Zip Code 93306
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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024616
Amount of Each Receipt this Period **25**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Ms. Jeraldine Trabant
Full Name (Last, First, Middle Initial)
Mailing Address 726 Loveville Road Cottage 94
City Hockessin State DE Zip Code 19707
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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024622
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Ms. Jean M. Lawton
Full Name (Last, First, Middle Initial)
Mailing Address 207 River Chase Drive
City Orlando State FL Zip Code 32807
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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024629
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1256 OF 2452 |
| | <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 Kehoe
Full Name (Last, First, Middle Initial)

Mailing Address 680 Canterbury Lane

City Cambria State CA Zip Code 93428

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011

Transaction ID : 3024656

Amount of Each Receipt this Period
 100

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 1235 E. 200 So. #402 #402

City SLC State UT Zip Code 84102

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2011

Transaction ID : 3025526

Amount of Each Receipt this Period
 25

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

C. Mrs. Ruth Gottlieb
Full Name (Last, First, Middle Initial)

Mailing Address 3300 Dary Rd Apt 5213

City Haverford State PA Zip Code 19041

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2011

Transaction ID : 3025531

Amount of Each Receipt this Period
 50

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1257 OF 2452 |
| | <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. Suzanne Davis
Full Name (Last, First, Middle Initial)
Mailing Address 9203 Cranfield Ln
City Charlotte State NC Zip Code 28277
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 ▼ 0

Date of Receipt 07 / 08 / 2011
Transaction ID : 3025545
Amount of Each Receipt this Period 50
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Ms. Barbara K. Andreas
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 436
City Laurelville State OH Zip Code 43135
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 ▼ 0

Date of Receipt 07 / 08 / 2011
Transaction ID : 3025648
Amount of Each Receipt this Period 50
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Ms. Grace Leight
Full Name (Last, First, Middle Initial)
Mailing Address 205 W. End Avenue, Apt. 6K
City New York State NY Zip Code 10023
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 ▼ 0

Date of Receipt 07 / 08 / 2011
Transaction ID : 3025656
Amount of Each Receipt this Period 250
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1258 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Mr. Herman Kurfirst
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 Galer St Apt 54
 City Seattle State WA Zip Code 98109
 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 ▼ 0

Date of Receipt 07 / 08 / 2011
Transaction ID : 3025664
 Amount of Each Receipt this Period 100
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Ms. Gwen J Gillis
 Full Name (Last, First, Middle Initial)
 Mailing Address 4722 Amberwood Court
 City Carlsbad State CA Zip Code 92008
 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 ▼ 0

Date of Receipt 07 / 11 / 2011
Transaction ID : 3026146
 Amount of Each Receipt this Period 50
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Ms. Toby Zakin
 Full Name (Last, First, Middle Initial)
 Mailing Address 3605 Raleigh Mtn Trail
 City Charlottesville State VA Zip Code 22903
 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 ▼ 0

Date of Receipt 07 / 11 / 2011
Transaction ID : 3026150
 Amount of Each Receipt this Period 100
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1259 OF 2452 |
| <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. Marilyn Gordon
Full Name (Last, First, Middle Initial)
Marilyn Gordon
Mailing Address 116 Walnut Grove Rd.
City Ridgefield State CT Zip Code 06877
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 **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026193
Amount of Each Receipt this Period **10**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Ms. Diane Farage
Full Name (Last, First, Middle Initial)
Diane Farage
Mailing Address 2541 Oakwood Dr. S.E.
City Grand Rapids State MI Zip Code 49506
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 **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026204
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Ms. Elyse Fleming
Full Name (Last, First, Middle Initial)
Elyse Fleming
Mailing Address 39905 Via Scena Unit 246
City Palm Desert State CA Zip Code 92260
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 **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026206
Amount of Each Receipt this Period **50**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1260 OF 2452 |
| | <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. Sarah K. Huber | | Date of Receipt MM / DD / YYYY 07 / 11 / 2011 |
| Mailing Address 8308 Berry Drive | | Transaction ID : 3026208 |
| City Evansville | State IN | Zip Code 47710 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100 |
| Name of Employer N/A | Occupation Retired | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Shirley J. Parish | | Date of Receipt MM / DD / YYYY 07 / 11 / 2011 |
| Mailing Address 1643 North Leeds Avenue | | Transaction ID : 3026209 |
| City Ontario | State CA | Zip Code 91764 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50 |
| Name of Employer N/A | Occupation RETIRED | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Miss Iris A A. Gruwell | | Date of Receipt MM / DD / YYYY 07 / 11 / 2011 |
| Mailing Address 290 Stoneykirk Dr | | Transaction ID : 3026215 |
| City Bella Vista | State AR | Zip Code 72715 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 20 |
| Name of Employer N/A | Occupation Retired | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1261 OF 2452 |
| | <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. Ruth R. Hailperin
 Full Name (Last, First, Middle Initial)
 Mailing Address 175 W. North Street, Apt. 234C
 City Nazaret State PA Zip Code 18064
 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 ▼ **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026224
 Amount of Each Receipt this Period **100**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Merryl J. Weber
 Full Name (Last, First, Middle Initial)
 Mailing Address 5808 Varna Ave
 City Van Nuys State CA Zip Code 91401
 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 ▼ **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026228
 Amount of Each Receipt this Period **50**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Ms. Suzanne R. Robinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 Circle Wood Road
 City Rochester State NY Zip Code 14625
 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 ▼ **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026238
 Amount of Each Receipt this Period **25**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1262 OF 2452 |
| | <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. Genevieve S James
Full Name (Last, First, Middle Initial)
Mailing Address 12 N Meadowcroft Ave #A
City Pittsburgh State PA Zip Code 15216
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 0

Date of Receipt 07 / 12 / 2011
Transaction ID : 3026773
Amount of Each Receipt this Period 25
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Dr. Beverly J. Gibbs
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 279
City Manchaca State TX Zip Code 78652
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 0

Date of Receipt 07 / 12 / 2011
Transaction ID : 3026777
Amount of Each Receipt this Period 100
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

c. Ms. Angelica S. Harter
Full Name (Last, First, Middle Initial)
Mailing Address 16 Arlington Street
City Cambridge State MA Zip Code 02140
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 0

Date of Receipt 07 / 12 / 2011
Transaction ID : 3026787
Amount of Each Receipt this Period 250
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... 0.00
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 1263 OF 2452 |
| | <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

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Ms. Patricia Ann Smith | | Date of Receipt MM / DD / YYYY 07 / 12 / 2011 |
| Mailing Address 234 Crescent Drive | | Transaction ID : 3026790 |
| City Orinda | State CA | Zip Code 94563 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50 |
| Name of Employer N/A | Occupation retired | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Mary E. Dimperio | | Date of Receipt MM / DD / YYYY 07 / 12 / 2011 |
| Mailing Address 4000 Cathedral Avenue NW Apt. 106B | | Transaction ID : 3026793 |
| City Washington | State DC | Zip Code 20016 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100 |
| Name of Employer N/A | Occupation Retired | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Mary C Tuttle | | Date of Receipt MM / DD / YYYY 07 / 12 / 2011 |
| Mailing Address 5968 Park Lake Rd Apt 226 | | Transaction ID : 3026796 |
| City East Lansing | State MI | Zip Code 48823 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25 |
| Name of Employer N/A | Occupation Retired | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1264 OF 2452 |
| | <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

A. Ms. Dianne Durrwachter
 Full Name (Last, First, Middle Initial)
 Mailing Address 809 West 5th Street
 City Port Angeles State WA Zip Code 98363
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2011
Transaction ID : 3027098
 Amount of Each Receipt this Period
 50
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Ms. Wm Stone Wallace
 Full Name (Last, First, Middle Initial)
 Mailing Address 219 Redwood Lane
 City Weems State VA Zip Code 22576
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2011
Transaction ID : 3027108
 Amount of Each Receipt this Period
 60
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Ms. Pamela K. Lopes
 Full Name (Last, First, Middle Initial)
 Mailing Address 1421 N Camino de Juan
 City Tucson State AZ Zip Code 85745
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2011
Transaction ID : 3027651
 Amount of Each Receipt this Period
 50
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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|---|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 1265 OF 2452 |
| | (check only one) |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Vivian E. Uttermann
 Full Name (Last, First, Middle Initial)
 Mailing Address 11113 Jollyway
 City Kensington State MD Zip Code 20895
 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 **0**

Date of Receipt **07 / 14 / 2011**
Transaction ID : 3027659
 Amount of Each Receipt this Period **12.5**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Ms. Ruth VanKampen
 Full Name (Last, First, Middle Initial)
 Mailing Address 81 W 14th Street
 City Holland State MI Zip Code 49423
 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 **0**

Date of Receipt **07 / 18 / 2011**
Transaction ID : 3029421
 Amount of Each Receipt this Period **100**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Ms. Elaine K. Cowles
 Full Name (Last, First, Middle Initial)
 Mailing Address 540 Amphill Rd
 City Cartersville State VA Zip Code 23027
 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 **0**

Date of Receipt **07 / 18 / 2011**
Transaction ID : 3029501
 Amount of Each Receipt this Period **25**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1266 OF 2452 |
| | <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. Mrs. Emiy B. Rutherford | | Date of Receipt MM / DD / YYYY 07 / 19 / 2011 |
| Mailing Address 2862 Raccoon Valley | | Transaction ID : 3029819 |
| City Granville | State OH | Zip Code 43023 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 111.12 | |
| Name of Employer N/A | Occupation Retired | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Ms. Jo B. Byler | | Date of Receipt MM / DD / YYYY 07 / 19 / 2011 |
| Mailing Address 1523 E Woodland Dr | | Transaction ID : 3029889 |
| City Dalton Gardens | State ID | Zip Code 83815 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 7.5 | |
| Name of Employer N/A | Occupation Retired | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Ms. Beverly Lipman | | Date of Receipt MM / DD / YYYY 07 / 19 / 2011 |
| Mailing Address 188 | | Transaction ID : 3029901 |
| City Portola Valley | State CA | Zip Code 94028 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100 | |
| Name of Employer N/A | Occupation retired | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1267 OF 2452 |
| | <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. Judith P. Borden
Full Name (Last, First, Middle Initial)
Mailing Address 16749 Addison Street
City Encino State CA Zip Code 91436
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 **0**

Date of Receipt **07 / 19 / 2011**
Transaction ID : 3030299
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Mrs. Ora Band
Full Name (Last, First, Middle Initial)
Mailing Address 333 South La Peer Drive
City Beverly Hills State CA Zip Code 90211
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 **0**

Date of Receipt **07 / 19 / 2011**
Transaction ID : 3030308
Amount of Each Receipt this Period **100**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Pat Rigg
Full Name (Last, First, Middle Initial)
Mailing Address 1303 N Walnut Blvd.
City Tucson State AZ Zip Code 85712
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 **0**

Date of Receipt **07 / 19 / 2011**
Transaction ID : 3030310
Amount of Each Receipt this Period **200**
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1268 OF 2452 |
| | <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. Edward R. Robertson
Full Name (Last, First, Middle Initial)

Mailing Address 2 Greens Way

City State Zip Code
Denver PA 17517

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 ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 19 / 2011

Transaction ID : 3030311

Amount of Each Receipt this Period
25

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

B. Ms. Florence Beller
Full Name (Last, First, Middle Initial)

Mailing Address 5101 Sunrise Hills Dr

City State Zip Code
Fair Oaks CA 95628

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 ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 19 / 2011

Transaction ID : 3030316

Amount of Each Receipt this Period
100

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

C. Ms. Joan Petty
Full Name (Last, First, Middle Initial)

Mailing Address 7 Jasmine Creek Drive

City State Zip Code
Corona DI Mar CA 92625

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 ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 19 / 2011

Transaction ID : 3030318

Amount of Each Receipt this Period
50

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1269 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Davida A. Carvin
 Full Name (Last, First, Middle Initial)
 Mailing Address 63 Atlantic Ave. 10A
 City Boston State MA Zip Code 02110
 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 ▼ 0

Date of Receipt 07 / 20 / 2011
Transaction ID : 3030583
 Amount of Each Receipt this Period 100
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Ms. Grace Flesche
 Full Name (Last, First, Middle Initial)
 Mailing Address 523 Pinehurst Boulevard
 City Kalamazoo State MI Zip Code 49006
 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 ▼ 0

Date of Receipt 07 / 20 / 2011
Transaction ID : 3030586
 Amount of Each Receipt this Period 50
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Mrs. Eleanor B. Landa
 Full Name (Last, First, Middle Initial)
 Mailing Address 6229 Celadon Cir
 City West Palm Beach State FL Zip Code 33418
 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 ▼ 0

Date of Receipt 07 / 20 / 2011
Transaction ID : 3031036
 Amount of Each Receipt this Period 100
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1270 OF 2452 |
| | <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. Nancy S. Rust

Mailing Address 18747 Ridgefield Rd. N W

City Shoreline State WA Zip Code 98177

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2011

Transaction ID : 3031639

Amount of Each Receipt this Period
100

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Ms. Diane G. Faissler

Mailing Address 1 Atlantic Rd

City Gloucester State MA Zip Code 01930

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2011

Transaction ID : 3031663

Amount of Each Receipt this Period
250

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Mr. Floyd H. Nordland

Mailing Address 16313 Somerset Dr

City Broomfield State CO Zip Code 80023

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2011

Transaction ID : 3031998

Amount of Each Receipt this Period
50

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1271 OF 2452 |
| | <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. Leah Horwitz

Mailing Address 305 Savage Farm Drive

City Ithaca State NY Zip Code 14850

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2011

Transaction ID : 3032029

Amount of Each Receipt this Period
 200

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Mrs. Patricia Colburn

Mailing Address 1559 Oakdale St.

City Pasadena State CA Zip Code 91106

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2011

Transaction ID : 3032055

Amount of Each Receipt this Period
 100

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Ms. Dorothy Joy

Mailing Address 10041 Resmar Pl.

City La Mesa State CA Zip Code 91941

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2011

Transaction ID : 3032770

Amount of Each Receipt this Period
 100

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1273 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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|-----------------------------|-----------------------------|-----------------------------|
| <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. Pamela L Lowry | | Date of Receipt MM / DD / YYYY 07 / 27 / 2011 |
| Mailing Address 27 Oak Road | | Transaction ID : 3035056 |
| City Santa Cruz | State CA | Zip Code 95060 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 200 |
| Name of Employer N/A | Occupation Retired | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Mrs. Sydney B. Spofford | | Date of Receipt MM / DD / YYYY 07 / 27 / 2011 |
| Mailing Address 1954 Michigan Avenue | | Transaction ID : 3035091 |
| City Marysville | State MI | Zip Code 48040 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 100 |
| Name of Employer N/A | Occupation Retired | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Elaine A. Bridges | | Date of Receipt MM / DD / YYYY 07 / 28 / 2011 |
| Mailing Address P.O. Box 3605 | | Transaction ID : 3035463 |
| City San Angelo | State TX | Zip Code 76902 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 1000 |
| Name of Employer N/A | Occupation Retired | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

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|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1275 OF 2452 |
| | <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. Sue Kilrain
Full Name (Last, First, Middle Initial)
Mailing Address 1800 Purdy Ave, #1002
Apt.1002
City Miami Beach State FL Zip Code 33139
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 ▼ 0

Date of Receipt 07 / 30 / 2011
Transaction ID : 3035805
Amount of Each Receipt this Period 200
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

B. Mrs. Lucille Celia Behrens
Full Name (Last, First, Middle Initial)
Mailing Address 63 South Lilburn Drive
City Garnerville State NY Zip Code 10923
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 ▼ 0

Date of Receipt 07 / 31 / 2011
Transaction ID : 3035815
Amount of Each Receipt this Period 20
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

C. Ms. Louise O. Cleveland
Full Name (Last, First, Middle Initial)
Mailing Address 902 Neal Drive
City Alexandria State VA Zip Code 22308
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 ▼ 0

Date of Receipt 07 / 29 / 2011
Transaction ID : 3035906
Amount of Each Receipt this Period 200
Debbie Stabenow Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1276 OF 2452 |
| | <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. Arlene Bender | | Date of Receipt MM / DD / YYYY 07 / 29 / 2011 |
| Mailing Address 7919 Via Ensenada | | Transaction ID : 3035907 |
| City Carlsbad | State CA | Zip Code 92009 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 110 | |
| Name of Employer N/A | Occupation Retired | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Mrs. Kathleen J. Bavelas | | Date of Receipt MM / DD / YYYY 07 / 11 / 2011 |
| Mailing Address 56 Pratt Lane | | Transaction ID : 3026119 |
| City Wolcott | State CT | Zip Code 06716 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 30 | |
| Name of Employer Gateway C C | Occupation retired but part-tim | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Ms. Shirley Lindquist | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 |
| Mailing Address 6555 Parkpoint Way NE | | Transaction ID : 3024231 |
| City Seattle | State WA | Zip Code 98115 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 10 | |
| Name of Employer N/A | Occupation retired teacher | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1277 OF 2452 |
| | <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. Mr. Leroy E. Walters
 Full Name (Last, First, Middle Initial)
 Mailing Address 265 Crest Ave Apt 2
 City Belle Vernon State PA Zip Code 15012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation RETIRED TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 07 / 11 / 2011
Transaction ID : 3026246
 Amount of Each Receipt this Period 50
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Ms. Jeanne Elkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 1537 Westminster Dr Apt. 112
 City Naperville State IL Zip Code 60563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Argonne National Lab Occupation Scientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 07 / 20 / 2011
Transaction ID : 3030593
 Amount of Each Receipt this Period 25
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Ms. Jean A. Wolff
 Full Name (Last, First, Middle Initial)
 Mailing Address 10543 Garwood Pl
 City Los Angeles State CA Zip Code 90024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Sculptor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 07 / 18 / 2011
Transaction ID : 3029418
 Amount of Each Receipt this Period 200
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1278 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Toby Coit
 Full Name (Last, First, Middle Initial)
 Mailing Address 119 Lafayette Street
 City Norwich State CT Zip Code 06360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self - Toby Coil Occupation SOCIAL WORK
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 21 / 2011**
Transaction ID : 3031654
 Amount of Each Receipt this Period **25**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

B. Ms. Kris Jensen
 Full Name (Last, First, Middle Initial)
 Mailing Address 10720 Braeburn Court
 City Ft. Wayne State IN Zip Code 46804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Scan, Inc. Occupation Social Worker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025628
 Amount of Each Receipt this Period **200**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

C. Ms. Sonia Vallianos
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Walker Street
 City Somerville State MA Zip Code 02144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Foxboro Co. Occupation Supervisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 19 / 2011**
Transaction ID : 3030305
 Amount of Each Receipt this Period **100**
 Debbie Stabenow Contributions
[MEMO ITEM]
 MEMO

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1279 OF 2452 |
| | <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. Jim Perry | | Date of Receipt MM / DD / YYYY 07 / 04 / 2011 |
| Mailing Address 2406 Tatnuck Ct | | Transaction ID : 3021923 |
| City Herndon | State VA | Zip Code 20171 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 80 | |
| Name of Employer International Display Systems | Occupation Sys Admin | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Ms. Margaret T. Gelin | | Date of Receipt MM / DD / YYYY 07 / 29 / 2011 |
| Mailing Address 105 Trowbridge Street, #4 | | Transaction ID : 3035900 |
| City Cambridge | State MA | Zip Code 02138 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 250 | |
| Name of Employer Framingham, MA | Occupation Teacher | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Ms. Doris Brody | | Date of Receipt MM / DD / YYYY 07 / 08 / 2011 |
| Mailing Address 15 Holly Lane | | Transaction ID : 3025635 |
| City Roslyn Heights | State NY | Zip Code 11577 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100 | |
| Name of Employer Bisque Travel | Occupation Travel Agent | Debbie Stabenow Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1280 OF 2452 |
| | <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. ann kirkpatrick
Full Name (Last, First, Middle Initial)

Mailing Address 432 W Cattle Drive Trail

City Flagstaff State AZ Zip Code 86001

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

Name of Employer None Occupation unemployed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 09 / 2011

Transaction ID : 3025451

Amount of Each Receipt this Period
30

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

B. Ms. Amy Thomson
Full Name (Last, First, Middle Initial)

Mailing Address 1505 SW Alaska St.

City Seattle State WA Zip Code 98106

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

Name of Employer Self employed Occupation WRiter

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2011

Transaction ID : 3027080

Amount of Each Receipt this Period
50

Debbie Stabenow Contributions

[MEMO ITEM]
MEMO

C. Ms. Emilie Simpson
Full Name (Last, First, Middle Initial)

Mailing Address 675 Harding Place Apt F4

City Nashville State TN Zip Code 37211

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

Name of Employer Genesco Inc Occupation Accountant Payable Clerk

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 05 / 2011

Transaction ID : 3023106

Amount of Each Receipt this Period
15

Janice Hahn Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1281 OF 2452 |
| | <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 R. Moorhouse
 Full Name (Last, First, Middle Initial)
 Mailing Address 632 Rolling Rock Rd
 City Bloomfield State MI Zip Code 48304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation analyst
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3021815
 Amount of Each Receipt this Period **50**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Ms. Idell Weisberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 4771 S. Chipping Glen
 City Bloomfield State MI Zip Code 48302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022047
 Amount of Each Receipt this Period **100**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Ms. Susan M. Damplo
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 W. 3rd St., Apt. 1401
 City New York State NY Zip Code 10012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer none Occupation attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023017
 Amount of Each Receipt this Period **100**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1282 OF 2452 |
| | <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 Ellen Houseal
Full Name (Last, First, Middle Initial)
Mailing Address 16952 Baruna Lane
City Huntington Beach State CA Zip Code 92649
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 06 / 2011
Transaction ID : 3024619
Amount of Each Receipt this Period 25
Janice Hahn Contributions
[MEMO ITEM]
MEMO

B. Ms. Nina Dodge Abrams
Full Name (Last, First, Middle Initial)
Mailing Address 12959 Talbot Lane
City Huntington Woods State MI Zip Code 48070
FEC ID number of contributing federal political committee. **C**
Name of Employer Abrams Law firm Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 13 / 2011
Transaction ID : 3027291
Amount of Each Receipt this Period 100
Janice Hahn Contributions
[MEMO ITEM]
MEMO

C. John Auyong
Full Name (Last, First, Middle Initial)
Mailing Address 835 1/2 South Sycamore Avenue
City Los Angeles State CA Zip Code 90036
FEC ID number of contributing federal political committee. **C**
Name of Employer Social Security Administration Occupation Attorney Advisor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 03 / 2011
Transaction ID : 3021679
Amount of Each Receipt this Period 10
Janice Hahn Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1283 OF 2452 |
| | <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. Susan Beerhartel Soule
 Full Name (Last, First, Middle Initial)
 Mailing Address 7324 W. Shore Drive
 City Minneapolis State MN Zip Code 55435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Business Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022052
 Amount of Each Receipt this Period **10**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Rebecca Kremer
 Full Name (Last, First, Middle Initial)
 Mailing Address 2228 Ruby Road
 City Hudson State WI Zip Code 54016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Formerly Medtronic, Inc. Occupation Community Volunteer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025459
 Amount of Each Receipt this Period **10**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. James Amory
 Full Name (Last, First, Middle Initial)
 Mailing Address 63 Cheddar Lane
 City LeRayssville State PA Zip Code 18829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3021665
 Amount of Each Receipt this Period **35**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1284 OF 2452 |
| | <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. Joan L. Stephenson | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2011 Transaction ID : 3022086 |
| Mailing Address 165 E. 35th Street, Apt. 4J | | Amount of Each Receipt this Period 250 Janice Hahn Contributions |
| City New York | State NY | |
| Zip Code 10016 | | [MEMO ITEM] MEMO |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer IBM | Occupation Consultant | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Canice K. Levin | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 07 / 2011 Transaction ID : 3025215 |
| Mailing Address 3436 Bannerwood Dr. | | Amount of Each Receipt this Period 100 Janice Hahn Contributions |
| City Annandale | State VA | |
| Zip Code 22003 | | [MEMO ITEM] MEMO |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer BRTRC | Occupation Consultant | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-----------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Carole Markus | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2011 Transaction ID : 3022048 |
| Mailing Address 112 Cardiff Road | | Amount of Each Receipt this Period 50 Janice Hahn Contributions |
| City Pittsburgh | State PA | |
| Zip Code 15237 | | [MEMO ITEM] MEMO |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer markwalt,inc | Occupation Corporate Secretary | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | |
|---|------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | 0.00 |

**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 1285 OF 2452 |
| | <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. Joy Cousminer

Mailing Address 350 W. 14th Street, Apt. 3D

| | | |
|------------------|-------------|-------------------|
| City New York | State NY | Zip Code 10014 |
|------------------|-------------|-------------------|

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

| | |
|--------------------------------|--------------------------------------|
| Name of Employer Bethex FCU | Occupation Credit Union Treasurer |
|--------------------------------|--------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 05 / 2011

Transaction ID : 3023075

Amount of Each Receipt this Period
75

Janice Hahn Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 1618 Yale Dr.

| | | |
|-----------------------|-------------|-------------------|
| City Mountain View | State CA | Zip Code 94040 |
|-----------------------|-------------|-------------------|

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

| | |
|--|------------------------------------|
| Name of Employer Mission Peak Unitarian Universalist Co | Occupation Director of Religiou |
|--|------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 05 / 2011

Transaction ID : 3023028

Amount of Each Receipt this Period
100

Janice Hahn Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 2331 Ocean Ave., Apt. 5A

| | | |
|------------------|-------------|-------------------|
| City Brooklyn | State NY | Zip Code 11229 |
|------------------|-------------|-------------------|

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

| | |
|--------------------------|----------------------|
| Name of Employer Self | Occupation Editor |
|--------------------------|----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : 3026223

Amount of Each Receipt this Period
20

Janice Hahn Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1286 OF 2452 |
| | <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. Jill W. W. Graham
 Full Name (Last, First, Middle Initial)
 Mailing Address 2439 Ashland Ave.
 City Evanston State IL Zip Code 60201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Loyola University Chicago Occupation emerita professor of
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023022
 Amount of Each Receipt this Period **50**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Mr. Kimball C. Wright
 Full Name (Last, First, Middle Initial)
 Mailing Address 5318 S Cornell Ave Apt 3E
 City Chicago State IL Zip Code 60615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American School Occupation English Instructor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023108
 Amount of Each Receipt this Period **15**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Ms. Susan Quinn
 Full Name (Last, First, Middle Initial)
 Mailing Address 4131 Lymer Dr.
 City San Diego State CA Zip Code 92116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer San Diego County Occupation Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3027407
 Amount of Each Receipt this Period **25**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1287 OF 2452 |
| | <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. Gwendolyn Santiago
 Full Name (Last, First, Middle Initial)
 Mailing Address 5915 North West Place
 City Austin State TX Zip Code 78731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TASBO Occupation Executive Director-T
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 04 / 2011**
Transaction ID : 3021929
 Amount of Each Receipt this Period **50**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Ms. Carolyn E. Crow
 Full Name (Last, First, Middle Initial)
 Mailing Address 1512 La Mesa Lane
 City Burlingame State CA Zip Code 94010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation financial planner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 12 / 2011**
Transaction ID : 3026810
 Amount of Each Receipt this Period **10**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Ms. Katherine A Read
 Full Name (Last, First, Middle Initial)
 Mailing Address 75 Nehoiden Road
 City Waban State MA Zip Code 02468
 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 **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025544
 Amount of Each Receipt this Period **250**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

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|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 1288 OF 2452 |
| | <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 K. Dastur
Full Name (Last, First, Middle Initial)
Mailing Address 7 Mozart DRive
City Greenville State DE Zip Code 19807
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023109
Amount of Each Receipt this Period 100
Janice Hahn Contributions
[MEMO ITEM]
MEMO

B. Mrs. Marilyn Dickson
Full Name (Last, First, Middle Initial)
Mailing Address 5637 Pointe Tremble Road
City Algonac State MI Zip Code 48001
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023145
Amount of Each Receipt this Period 20
Janice Hahn Contributions
[MEMO ITEM]
MEMO

C. Ms. Hazel Cypen
Full Name (Last, First, Middle Initial)
Mailing Address 320 W. Dilido Drive
City Miami Beach State FL Zip Code 33139
FEC ID number of contributing federal political committee. **C**
Name of Employer n/a Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 06 / 2011
Transaction ID : 3024648
Amount of Each Receipt this Period 25
Janice Hahn Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1289 OF 2452 |
| | <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. Mrs. Sara R. Nickell
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 Emerald Hills Lane
 City Newnan State GA Zip Code 30263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025658
 Amount of Each Receipt this Period **50**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Ms. Susie Langdon Kass
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 Vista Verde Court
 City San Francisco State CA Zip Code 94131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer UC-San Francisco Occupation Instructor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024601
 Amount of Each Receipt this Period **250**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Mr. Bruno Calcagni
 Full Name (Last, First, Middle Initial)
 Mailing Address 9648 Callita Street
 City Arcadia State CA Zip Code 91007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sony Studios Occupation LABOR DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022083
 Amount of Each Receipt this Period **100**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1290 OF 2452 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
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| | <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. Jeanne Y. Turgeon
 Full Name (Last, First, Middle Initial)
 Mailing Address 4139 19th Avenue SW
 City Seattle State WA Zip Code 98106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Univ. of Washington Occupation Medical Technologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023051
 Amount of Each Receipt this Period **10**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Ms. Julie A. Eidsvoog
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 15492
 City Beverly Hills State CA Zip Code 90209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-employed Occupation Musician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 03 / 2011**
Transaction ID : 3021698
 Amount of Each Receipt this Period **100**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Ms. Marcia M. Curran
 Full Name (Last, First, Middle Initial)
 Mailing Address 940 E. Crystal Downs Dr.
 City Frankfort State MI Zip Code 49635
 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 ▼ **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023008
 Amount of Each Receipt this Period **75**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1291 OF 2452 |
| <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. Mr. Glenn H. Watts
Full Name (Last, First, Middle Initial)
Mailing Address 1767 Southview Drive
City Yellow Springs State OH Zip Code 45387
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 **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023113
Amount of Each Receipt this Period **50**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

B. Ms. Barbara D. Moore
Full Name (Last, First, Middle Initial)
Mailing Address 83 Via Descanso
City Monterey State CA Zip Code 93940
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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024350
Amount of Each Receipt this Period **50**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

C. Mrs. Suzy W. Filbert
Full Name (Last, First, Middle Initial)
Mailing Address 114 Taplow Rd.
City Baltimore State MD Zip Code 21212
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 **0**

Date of Receipt **07 / 07 / 2011**
Transaction ID : 3025339
Amount of Each Receipt this Period **100**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1293 OF 2452 |
| <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

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Ms. Nancy L. Lee | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 1130 Laureles Drive | | Transaction ID : 3023083 |
| City Los Altos | State CA | Zip Code 94022 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100 | |
| Name of Employer Rite Aid | Occupation Pharmacist | Janice Hahn Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Thomas Burke | | Date of Receipt MM / DD / YYYY 07 / 03 / 2011 |
| Mailing Address PO Box 112310 | | Transaction ID : 3021688 |
| City Anchorage | State AK | Zip Code 99511 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 75 | |
| Name of Employer Southcentral Foundation | Occupation Physician | Janice Hahn Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Mr. Allen W. Strous | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 |
| Mailing Address 11339 Spangler Road | | Transaction ID : 3024281 |
| City Circleville | State OH | Zip Code 43113 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25 | |
| Name of Employer U.S. Postal Service | Occupation Postal clerk | Janice Hahn Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

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|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1294 OF 2452 |
| | <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. Neena B. Schwartz | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 05 / 2011 Transaction ID : 3023039 |
| Mailing Address 1511 Lincoln Street | | Amount of Each Receipt this Period 250 Janice Hahn Contributions |
| City Evanston | State IL | |
| Zip Code 60201 | | [MEMO ITEM] MEMO |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Northwestern Univ. | Occupation Professor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Joan T. Werner | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 05 / 2011 Transaction ID : 3023059 |
| Mailing Address 4594 Euclid Avenue | | Amount of Each Receipt this Period 25 Janice Hahn Contributions |
| City San Diego | State CA | |
| Zip Code 92115 | | [MEMO ITEM] MEMO |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer San Diego State U | Occupation Professor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Dr. Paul J Wiita | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 05 / 2011 Transaction ID : 3023107 |
| Mailing Address 139 Random Rd. | | Amount of Each Receipt this Period 50 Janice Hahn Contributions |
| City Princeton | State NJ | |
| Zip Code 08540 | | [MEMO ITEM] MEMO |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer The College of New Jersey | Occupation Professor | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

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|---|------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | 0.00 |

**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 1295 OF 2452 |
| <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. Jonathan L. Sapirstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 17636 Turf Court
 City South Bend State IN Zip Code 46635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of Notre Dame Occupation Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025657
 Amount of Each Receipt this Period **100**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Ms. Robin L. Weber
 Full Name (Last, First, Middle Initial)
 Mailing Address 3901 Independence Ave., Apt. 1 # 15
 City Bronx State NY Zip Code 10463
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ATT Occupation Project Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022088
 Amount of Each Receipt this Period **50**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Dr. Leah D. Dick
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 SW B Avenue Suite 120
 City Lawton State OK Zip Code 73501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022044
 Amount of Each Receipt this Period **50**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1296 OF 2452 |
| | <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. Linda J. Millet
 Full Name (Last, First, Middle Initial)
 Mailing Address 649 Hudson S
 City New York State NY Zip Code 10014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Psychoterapist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025642
 Amount of Each Receipt this Period **50**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Mr. Lawrence Borger
 Full Name (Last, First, Middle Initial)
 Mailing Address 21622 68th Avenue
 City Flushing State NY Zip Code 11364
 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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022055
 Amount of Each Receipt this Period **25**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Ms. Margret Jacoby
 Full Name (Last, First, Middle Initial)
 Mailing Address 912 Blossom Drive
 City Santa Clara State CA Zip Code 95050
 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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022078
 Amount of Each Receipt this Period **100**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1297 OF 2452 |
| <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. Frances L. Plotnik
Full Name (Last, First, Middle Initial)
Mailing Address 211 Bluebird Lane
City Central State SC Zip Code 29630
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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022082
Amount of Each Receipt this Period **40**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

B. Ms. Lynn Freeman
Full Name (Last, First, Middle Initial)
Mailing Address 551 W. Cordova Road, # 543
City Santa Fe State NM Zip Code 87505
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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022085
Amount of Each Receipt this Period **20**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

C. Ms. Helen Davis
Full Name (Last, First, Middle Initial)
Mailing Address 4601 N Park Ave Apt 1207
City Chevy Chase State MD Zip Code 20815
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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022091
Amount of Each Receipt this Period **75**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

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| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 1298 OF 2452 |
| | <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. Jackie M. Giordano
Full Name (Last, First, Middle Initial)
Mailing Address 711 De Soto Ln.
City Weldon Spring State MO Zip Code 63304
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 ▼ 0

Date of Receipt 07 / 01 / 2011
Transaction ID : 3022094
Amount of Each Receipt this Period 50
Janice Hahn Contributions
[MEMO ITEM]
MEMO

B. Ms. Marylu E. Barnekow
Full Name (Last, First, Middle Initial)
Mailing Address 300 Bluff Valley Drive Lot 216
City Fredericksburg State TX Zip Code 78624
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 ▼ 0

Date of Receipt 07 / 01 / 2011
Transaction ID : 3022095
Amount of Each Receipt this Period 30
Janice Hahn Contributions
[MEMO ITEM]
MEMO

c. Mrs. Mary D. Goodrich
Full Name (Last, First, Middle Initial)
Mailing Address 533 Meadowbrook Ln.
City Shreveport State LA Zip Code 71105
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 ▼ 0

Date of Receipt 07 / 01 / 2011
Transaction ID : 3022098
Amount of Each Receipt this Period 25
Janice Hahn Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
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| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 1299 OF 2452 |
| | <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. Christiane Struppeck
Full Name (Last, First, Middle Initial)
Mailing Address 120 E Pearl Dr.
City Slidell State LA Zip Code 70461
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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022100
Amount of Each Receipt this Period **20**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

B. Ms. Anne Kelley
Full Name (Last, First, Middle Initial)
Mailing Address 9420 Prince George Ln., Apt. A
City Raleigh State NC Zip Code 27615
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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022102
Amount of Each Receipt this Period **35**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

C. Mrs. Vyra D. Lantz
Full Name (Last, First, Middle Initial)
Mailing Address 378 Patchen Dr.
City Lexington State KY Zip Code 40517
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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022103
Amount of Each Receipt this Period **25**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1300 OF 2452 |
| | <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. Patricia W. Davidson | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 3636 Haynie | | Transaction ID : 3023024 |
| City Dallas | State TX | Zip Code 75205 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Janice Hahn Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Ms. Sandra Barron Fiske | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 3100 N Leisure World Blvd Apt 907 | | Transaction ID : 3023048 |
| City Silver Spring | State MD | Zip Code 20906 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Janice Hahn Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Ms. Mary G. O'Hara | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 231 Melbourne Avenue | | Transaction ID : 3023061 |
| City Syracuse | State NY | Zip Code 13224 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25 | |
| Name of Employer REQUESTED | Occupation REQUESTED | Janice Hahn Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1301 OF 2452 |
| | <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

A. Ms. Barbara Gorenstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 1919 Chestnut Street, # 917
 City Philadelphia State PA Zip Code 19103
 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 ▼ **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023069
 Amount of Each Receipt this Period **15**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Ms. Anita Marsten
 Full Name (Last, First, Middle Initial)
 Mailing Address 612 N. Linden Drive
 City Beverly Hills State CA Zip Code 90210
 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 ▼ **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023077
 Amount of Each Receipt this Period **100**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Mr. William H. Rolls
 Full Name (Last, First, Middle Initial)
 Mailing Address 226 Renfrew Ave
 City Trenton State NJ Zip Code 08618
 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 ▼ **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023078
 Amount of Each Receipt this Period **25**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1302 OF 2452 |
| | <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. Helen K. Layng
Full Name (Last, First, Middle Initial)

Mailing Address 3417 Landstrom Rd

City Rockford State IL Zip Code 61107

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 ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 05 / 2011

Transaction ID : 3023079

Amount of Each Receipt this Period
50

Janice Hahn Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 4800 23rd Road S.

City Arlington State VA Zip Code 22206

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 ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 05 / 2011

Transaction ID : 3023086

Amount of Each Receipt this Period
150

Janice Hahn Contributions

[MEMO ITEM]
MEMO

C. Mr. Bernard Kostetsky
Full Name (Last, First, Middle Initial)

Mailing Address 1613 Hillwood Drive

City Mesquite State TX Zip Code 75149

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 ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 05 / 2011

Transaction ID : 3023097

Amount of Each Receipt this Period
25

Janice Hahn Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1303 OF 2452 |
| | <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

A. Ms. Elsie S. Sweeney
 Full Name (Last, First, Middle Initial)
 Mailing Address 21775 Woodland Crest Drive
 City Woodland Hls State CA Zip Code 91364
 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 ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023128
 Amount of Each Receipt this Period 50
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Ms. Sondra Lisson
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Scotland Hts
 City North Reading State MA Zip Code 01864
 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 ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023133
 Amount of Each Receipt this Period 25
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Ms. Joan Sowinski
 Full Name (Last, First, Middle Initial)
 Mailing Address 16702 E Berry Lane
 City Centennial State CO Zip Code 80015
 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 ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023137
 Amount of Each Receipt this Period 30
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1304 OF 2452 |
| | <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. Karyl Stoia
Full Name (Last, First, Middle Initial)
Mailing Address 30 Forest St.
City Lynn State MA Zip Code 01905
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 ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023141
Amount of Each Receipt this Period 10
Janice Hahn Contributions
[MEMO ITEM]
MEMO

B. Ms. Lisa S. Gottesman
Full Name (Last, First, Middle Initial)
Mailing Address 1 East Shore Road
City Mountain Lakes State NJ Zip Code 07046
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 ▼ 0

Date of Receipt 07 / 06 / 2011
Transaction ID : 3024357
Amount of Each Receipt this Period 100
Janice Hahn Contributions
[MEMO ITEM]
MEMO

C. Mrs. Charlotte Masters
Full Name (Last, First, Middle Initial)
Mailing Address 917 Four Seasons Drive
City Wayne State NJ Zip Code 07470
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 ▼ 0

Date of Receipt 07 / 06 / 2011
Transaction ID : 3024652
Amount of Each Receipt this Period 15
Janice Hahn Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1306 OF 2452 |
| | <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. Madolyn Tryon
Full Name (Last, First, Middle Initial)
Mailing Address 63970 E 297 Ln.
City Grove State OK Zip Code 74344
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 0

Date of Receipt 07 / 06 / 2011
Transaction ID : 3024664
Amount of Each Receipt this Period 20
Janice Hahn Contributions
[MEMO ITEM]
MEMO

B. Ms. Amadea Kramer
Full Name (Last, First, Middle Initial)
Mailing Address 2417 Spaulding Avenue
City Berkeley State CA Zip Code 94703
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 0

Date of Receipt 07 / 07 / 2011
Transaction ID : 3025217
Amount of Each Receipt this Period 40
Janice Hahn Contributions
[MEMO ITEM]
MEMO

C. Mr. Dean Nachreiner
Full Name (Last, First, Middle Initial)
Mailing Address 12 Sherman Terrace Unit 1
City Madison State WI Zip Code 53704
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 0

Date of Receipt 07 / 07 / 2011
Transaction ID : 3025367
Amount of Each Receipt this Period 10
Janice Hahn Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

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|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 1307 OF 2452 (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

A. Ms. Kathleen Dwire
Full Name (Last, First, Middle Initial)
Mailing Address 1612 Peterson Pl.
City Fort Collins State CO Zip Code 80525
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 ▼ **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025667
Amount of Each Receipt this Period **10**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

B. Mr. Richard Parrish
Full Name (Last, First, Middle Initial)
Mailing Address 30862 Turquoise Pl.
City Lebanon State OR Zip Code 97355
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 ▼ **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025668
Amount of Each Receipt this Period **51**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

C. Ms. Patricia Melsheimer
Full Name (Last, First, Middle Initial)
Mailing Address 2640 Belgian Place
City Arroyo Grande State CA Zip Code 93420
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 ▼ **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026250
Amount of Each Receipt this Period **100**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1309 OF 2452 |
| | <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 Collamore
Full Name (Last, First, Middle Initial)
Mailing Address 7 Perkins Avenue

| | | |
|-----------------|-------------|-------------------|
| City Reading | State MA | Zip Code 01867 |
|-----------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 12 | | 2011 |

Transaction ID : 3026784

Amount of Each Receipt this Period

| |
|----|
| 25 |
|----|

Janice Hahn Contributions

[MEMO ITEM]
MEMO

B. Ms. Hilda L. Kurowski
Full Name (Last, First, Middle Initial)
Mailing Address 1009 Vassar Drive

| | | |
|---------------|-------------|-------------------|
| City Davis | State CA | Zip Code 95616 |
|---------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 12 | | 2011 |

Transaction ID : 3026797

Amount of Each Receipt this Period

| |
|-----|
| 100 |
|-----|

Janice Hahn Contributions

[MEMO ITEM]
MEMO

C. Mr. Mirko Dotlich
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 515

| | | |
|---------------|-------------|-------------------|
| City Bovey | State MN | Zip Code 55709 |
|---------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 12 | | 2011 |

Transaction ID : 3026803

Amount of Each Receipt this Period

| |
|----|
| 25 |
|----|

Janice Hahn Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1310 OF 2452 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
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| | | <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. Jane Sparks-Nelson
Full Name (Last, First, Middle Initial)
Mailing Address 154 Locust Hl. # 2

City Frankfort State KY Zip Code 40601

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 ▼ **0**

Date of Receipt
07 / 12 / 2011
Transaction ID : **3026809**

Amount of Each Receipt this Period
50

Janice Hahn Contributions

[MEMO ITEM]
MEMO

B. Ms. Hilary Andrews
Full Name (Last, First, Middle Initial)
Mailing Address 465 Terrace Rd.

City Santa Barbara State CA Zip Code 93109

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 ▼ **0**

Date of Receipt
07 / 12 / 2011
Transaction ID : **3026815**

Amount of Each Receipt this Period
5

Janice Hahn Contributions

[MEMO ITEM]
MEMO

C. Ms. Gayle A. Kaplan
Full Name (Last, First, Middle Initial)
Mailing Address 5929 Walnut Dr

City Minneapolis State MN Zip Code 55436

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

Name of Employer Business Dynamics Inc. Occupation Research Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
07 / 06 / 2011
Transaction ID : **3024604**

Amount of Each Receipt this Period
50

Janice Hahn Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1311 OF 2452 |
| | <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. Joyce Powers
 Full Name (Last, First, Middle Initial)
 Mailing Address 9738 Overland Road
 City Mount Horeb State WI Zip Code 53572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CRM Ecosystems Inc. Occupation Rest. Ecologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023084
 Amount of Each Receipt this Period **35**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Ms. Jeanine Dawson
 Full Name (Last, First, Middle Initial)
 Mailing Address 13207 146th pl. s.e.
 City Snohomish State WA Zip Code 98290
 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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3021782
 Amount of Each Receipt this Period **100**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Ms. Marlene H Cianci
 Full Name (Last, First, Middle Initial)
 Mailing Address 1704 Glenkarney PI
 City Silver Spring State MD Zip Code 20902
 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 **0**

Date of Receipt **07 / 03 / 2011**
Transaction ID : 3021807
 Amount of Each Receipt this Period **25**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1312 OF 2452 |
| | <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. Alice Ray

Mailing Address 165 Warde Terrace, Apt. 1D
Apt. 1D

City State Zip Code
Fairfield CT 06825

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 ▼
0

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 02 / 2011

Transaction ID : 3021817

Amount of Each Receipt this Period
15

Janice Hahn Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Mr. Ronald H. Berkenblit

Mailing Address 771 Shore Rd

City State Zip Code
Long Beach NY 11561

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 ▼
0

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2011

Transaction ID : 3021870

Amount of Each Receipt this Period
10

Janice Hahn Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Ms. Jean J. Robinson

Mailing Address 9840 S Pulaski Road # 321

City State Zip Code
Oak Lawn IL 60453

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 ▼
0

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2011

Transaction ID : 3022059

Amount of Each Receipt this Period
100

Janice Hahn Contributions

[MEMO ITEM]
MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1313 OF 2452 |
| | <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. Edward Compere
Full Name (Last, First, Middle Initial)

Mailing Address 15161 Ford Rd Apt 208

City Dearborn State MI Zip Code 48126

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2011

Transaction ID : 3022061

Amount of Each Receipt this Period
 50

Janice Hahn Contributions

[MEMO ITEM]
MEMO

B. Ms. Elizabeth F. Clark
Full Name (Last, First, Middle Initial)

Mailing Address 391 Dumbarton Blvd.

City Richmond Heights State OH Zip Code 44143

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2011

Transaction ID : 3022063

Amount of Each Receipt this Period
 50

Janice Hahn Contributions

[MEMO ITEM]
MEMO

c. Mr. Ralph J. Stone
Full Name (Last, First, Middle Initial)

Mailing Address 80 Lincoln Avenue

City Florham Park State NJ Zip Code 07932

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2011

Transaction ID : 3022081

Amount of Each Receipt this Period
 150

Janice Hahn Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1315 OF 2452 |
| | <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. Cashbox MCash
Full Name (Last, First, Middle Initial)
Mailing Address 1120 Connecticut Ave NW Suite Ste. 1100
City Washington State DC Zip Code 20036
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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022106
Amount of Each Receipt this Period **1**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

B. Ms. Arax Hicks
Full Name (Last, First, Middle Initial)
Mailing Address 170 Avenue C Apt 10C
City New York State NY Zip Code 10009
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 **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023025
Amount of Each Receipt this Period **25**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

C. Ms. Gayle Larson
Full Name (Last, First, Middle Initial)
Mailing Address 1973 Meadow Ridge Dr
City Commerce State MI Zip Code 48390
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 **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023029
Amount of Each Receipt this Period **25**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1316 OF 2452 |
| | <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. Mr. George H. Caldwell
 Full Name (Last, First, Middle Initial)
 Mailing Address 10010 Frederick Avenue
 City Kensington State MD Zip Code 20895
 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 **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023030
 Amount of Each Receipt this Period **50**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Ms. Diann Banks Williamson
 Full Name (Last, First, Middle Initial)
 Mailing Address 17321 Littlefield Street, #8
 City Detroit State MI Zip Code 48235
 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 **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023031
 Amount of Each Receipt this Period **50**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Ms. Doris Peckner
 Full Name (Last, First, Middle Initial)
 Mailing Address 475 19th Street
 City Santa Monica State CA Zip Code 90402
 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 **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023038
 Amount of Each Receipt this Period **25**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1317 OF 2452 |
| | (check only one) |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Frances J. Kwapil
Full Name (Last, First, Middle Initial)
Mailing Address 12501 Greenwood Avenue N
Apt. C320
City Seattle State WA Zip Code 98133
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 ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023047
Amount of Each Receipt this Period 100
Janice Hahn Contributions
[MEMO ITEM]
MEMO

B. Mr. Lawrence C. Baldwin
Full Name (Last, First, Middle Initial)
Mailing Address 13708 Leland Road
City Centreville State VA Zip Code 20120
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 ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023053
Amount of Each Receipt this Period 50
Janice Hahn Contributions
[MEMO ITEM]
MEMO

C. Ms. Margaret S. Saunders
Full Name (Last, First, Middle Initial)
Mailing Address 7622 Winterberry Place
City Bethesda State MD Zip Code 20817
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 ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023060
Amount of Each Receipt this Period 100
Janice Hahn Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1318 OF 2452 |
| | (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. Sandra J. Adams
Full Name (Last, First, Middle Initial)
Mailing Address 1863 San Ramon Avenue
City Berkeley State CA Zip Code 94707
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 ▼ **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023062
Amount of Each Receipt this Period **50**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

B. Ms. Suzanne Colucci
Full Name (Last, First, Middle Initial)
Mailing Address 7155 Hillside Drive
City Clarkston State MI Zip Code 48346
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 ▼ **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023070
Amount of Each Receipt this Period **100**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

C. Ms. Phyllis M Keimach
Full Name (Last, First, Middle Initial)
Mailing Address 1 El Vedado Lane #27
City Santa Barbara State CA Zip Code 93105
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 ▼ **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023076
Amount of Each Receipt this Period **10**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1319 OF 2452 |
| | <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. Jilma Marshall
Full Name (Last, First, Middle Initial)

Mailing Address 608 Steiner Street

City San Francisco State CA Zip Code 94117

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 05 / 2011

Transaction ID : 3023080

Amount of Each Receipt this Period
10

Janice Hahn Contributions

[MEMO ITEM]
MEMO

B. Ms. Joyce Salomon
Full Name (Last, First, Middle Initial)

Mailing Address 695 NW 110 Ave

City Coral Springs State FL Zip Code 33071

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 05 / 2011

Transaction ID : 3023085

Amount of Each Receipt this Period
50

Janice Hahn Contributions

[MEMO ITEM]
MEMO

C. Mrs. Judy Fitzsimmons
Full Name (Last, First, Middle Initial)

Mailing Address 11282 Caminito Aclara

City San Diego State CA Zip Code 92126

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 05 / 2011

Transaction ID : 3023093

Amount of Each Receipt this Period
100

Janice Hahn Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1320 OF 2452 |
| | <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. Jane Walsh Gralen
Full Name (Last, First, Middle Initial)

Mailing Address 42 Durham Court

City Burr Ridge State IL Zip Code 60527

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 ▼ **0**

Date of Receipt **07 / 05 / 2011**

Transaction ID : 3023094

Amount of Each Receipt this Period **75**

Janice Hahn Contributions

[MEMO ITEM]
MEMO

B. Ms. Pat Lewis
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 675

City South Beach State OR Zip Code 97366

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 ▼ **0**

Date of Receipt **07 / 05 / 2011**

Transaction ID : 3023112

Amount of Each Receipt this Period **50**

Janice Hahn Contributions

[MEMO ITEM]
MEMO

C. Ms. Joan Benesch
Full Name (Last, First, Middle Initial)

Mailing Address 4444 Linnean Avenue NW

City Washington State DC Zip Code 20008

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 ▼ **0**

Date of Receipt **07 / 05 / 2011**

Transaction ID : 3023140

Amount of Each Receipt this Period **500**

Janice Hahn Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1321 OF 2452 |
| | <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. Mr. Thomas J J. Cabot
 Full Name (Last, First, Middle Initial)
 Mailing Address 9326 W Cedar Hill Cir N
 City Sun City State AZ Zip Code 85351
 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 ▼ 0

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024170
 Amount of Each Receipt this Period
 25
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Ms. Vesta S. Downer
 Full Name (Last, First, Middle Initial)
 Mailing Address 509 Hillwood Ave
 City Falls Church State VA Zip Code 22042
 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 ▼ 0

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024296
 Amount of Each Receipt this Period
 250
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Ms. Miriam B. Butterworth
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 Seabury Dr. Apt. 2112
 City Bloomfield State CT Zip Code 06002
 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 ▼ 0

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024299
 Amount of Each Receipt this Period
 100
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1322 OF 2452 |
| | <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. Marcia K Allen

Mailing Address 620 Sand Hill Road, Apt 318D
apt318d

City Palo Alto State CA Zip Code 94304

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 06 / 2011

Transaction ID : 3024302

Amount of Each Receipt this Period
100

Janice Hahn Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Ms. Jean Wilcox

Mailing Address 1400 Geary Blvd Apt 7G
1400 Geary BLVD Apt 7G

City San Francisco State CA Zip Code 94109

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 06 / 2011

Transaction ID : 3024310

Amount of Each Receipt this Period
35

Janice Hahn Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Ms. Marianna G. Paulson

Mailing Address 152 W Dundee Rd

City Barrington State IL Zip Code 60010

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 06 / 2011

Transaction ID : 3024358

Amount of Each Receipt this Period
100

Janice Hahn Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1323 OF 2452 |
| <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. Barbara W. Klein
 Full Name (Last, First, Middle Initial)
 Mailing Address 68 Chestnut Hill Road
 City Killingworth State CT Zip Code 06419
 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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024359
 Amount of Each Receipt this Period **50**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Ms. Cecelia Walker
 Full Name (Last, First, Middle Initial)
 Mailing Address 3740 Luther Ct
 City Burlington State NC Zip Code 27215
 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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024377
 Amount of Each Receipt this Period **25**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Ms. Laura I. Ferns
 Full Name (Last, First, Middle Initial)
 Mailing Address 1690 N Crystal Cv
 City Haslett State MI Zip Code 48840
 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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024389
 Amount of Each Receipt this Period **25**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1324 OF 2452
(check only one)

| | | | | | | | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|
| <input checked="" type="checkbox"/> | 11a | <input type="checkbox"/> | 11b | <input type="checkbox"/> | 11c | <input type="checkbox"/> | 12 | <input type="checkbox"/> | 13 | <input type="checkbox"/> | 14 | <input type="checkbox"/> | 15 | <input type="checkbox"/> | 16 | <input type="checkbox"/> | 17 |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Ms. Viola Krasnowski

Mailing Address 511 S Crestwood Lane

City Mount Prospect State IL Zip Code 60056

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011

Transaction ID : 3024441

Amount of Each Receipt this Period
 20

Janice Hahn Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Mr. Byron S. Benton

Mailing Address 300 Avery Hts

City Hartford State CT Zip Code 06106

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011

Transaction ID : 3024610

Amount of Each Receipt this Period
 50

Janice Hahn Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Ms. Eleanor Weinstock

Mailing Address 525 South Flagler Drive

City West Palm Beach State FL Zip Code 33401

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011

Transaction ID : 3024620

Amount of Each Receipt this Period
 100

Janice Hahn Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1325 OF 2452 |
| | <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 M. Lawton
 Full Name (Last, First, Middle Initial)
 Mailing Address 207 River Chase Drive
 City Orlando State FL Zip Code 32807
 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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024628
 Amount of Each Receipt this Period **50**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Ms. Constance Murray
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Oak Meadow Lane
 City Carmel Valley State CA Zip Code 93924
 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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024633
 Amount of Each Receipt this Period **250**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Mr. William B B. Novoa
 Full Name (Last, First, Middle Initial)
 Mailing Address 39 Farm Drive
 City Farmington State CT Zip Code 06032
 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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024638
 Amount of Each Receipt this Period **25**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1326 OF 2452 |
| | <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. Mary Rux North
 Full Name (Last, First, Middle Initial)
 Mailing Address 836 Welcome Way SE
 City Salem State OR Zip Code 97302
 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 **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024647
 Amount of Each Receipt this Period
 20
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Lois Hess
 Full Name (Last, First, Middle Initial)
 Mailing Address 9510 Kasota Ct.
 City Fort Wayne State IN Zip Code 46804
 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 **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024663
 Amount of Each Receipt this Period
 100
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Mr. Robert J. Oremus
 Full Name (Last, First, Middle Initial)
 Mailing Address 965 Rogers Street Unit 401
 City Downers Grove State IL Zip Code 60515
 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 **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2011
Transaction ID : 3025366
 Amount of Each Receipt this Period
 300
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

| | |
|---|------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1327 OF 2452 |
| | <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. Dolores Chase
Full Name (Last, First, Middle Initial)
Mailing Address 1235 E. 200 So. #402
#402
City SLC State UT Zip Code 84102
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 ▼ 0

Date of Receipt
MM / DD / YYYY
07 / 10 / 2011
Transaction ID : 3025525
Amount of Each Receipt this Period
100
Janice Hahn Contributions
[MEMO ITEM]
MEMO

B. Mrs. Suzanne Davis
Full Name (Last, First, Middle Initial)
Mailing Address 9203 Cranfield Ln
City Charlotte State NC Zip Code 28277
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 ▼ 0

Date of Receipt
MM / DD / YYYY
07 / 08 / 2011
Transaction ID : 3025547
Amount of Each Receipt this Period
50
Janice Hahn Contributions
[MEMO ITEM]
MEMO

C. Mr. John Vanderstar
Full Name (Last, First, Middle Initial)
Mailing Address 113 Goodson Spring Rd
City Waynesville State NC Zip Code 28786
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 ▼ 0

Date of Receipt
MM / DD / YYYY
07 / 08 / 2011
Transaction ID : 3025638
Amount of Each Receipt this Period
100
Janice Hahn Contributions
[MEMO ITEM]
MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1328 OF 2452 |
| | <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. Bright N. Springman
 Full Name (Last, First, Middle Initial)
 Mailing Address 4001 Pinehurst Court
 City Riverton State WY Zip Code 82501
 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 ▼ **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025641
 Amount of Each Receipt this Period **50**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Ms. Dorothy Fisher
 Full Name (Last, First, Middle Initial)
 Mailing Address 1500 Brecknock Rd Ste 318
 City Greenport State NY Zip Code 11944
 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 ▼ **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025652
 Amount of Each Receipt this Period **50**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Ms. Joy Kinz
 Full Name (Last, First, Middle Initial)
 Mailing Address 64 Little Tree Lane
 City Hilton State NY Zip Code 14468
 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 ▼ **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025666
 Amount of Each Receipt this Period **25**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1329 OF 2452 |
| | <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. Ms. Dorothy Wolosoff

Mailing Address 5101 N Casa Blanca Road # 7

| | | |
|-------------------------|-------------|-------------------|
| City Paradise Valley | State AZ | Zip Code 85253 |
|-------------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : 3026152

Amount of Each Receipt this Period
50

Janice Hahn Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Ms. Beverly D. Dunham

Mailing Address PO Box 27

| | | |
|----------------|-------------|-------------------|
| City Seward | State AK | Zip Code 99664 |
|----------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : 3026153

Amount of Each Receipt this Period
75

Janice Hahn Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Ms. Bonnie S. Margolin

Mailing Address PO Box 22461

| | | |
|----------------|-------------|-------------------|
| City Denver | State CO | Zip Code 80222 |
|----------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : 3026202

Amount of Each Receipt this Period
25

Janice Hahn Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1330 OF 2452 |
| | <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. Margaret P. Dwyer
Full Name (Last, First, Middle Initial)
Mailing Address 1550 El Camino Real Apt. 309

| | | |
|-------------------|-------------|-------------------|
| City Lady Lake | State FL | Zip Code 32159 |
|-------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 11 | | 2011 |

Transaction ID : 3026203

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 00 |
|-----|---|----|

100

Janice Hahn Contributions

[MEMO ITEM]
MEMO

B. Dr. Nora A McGuinness
Full Name (Last, First, Middle Initial)
Mailing Address 704 Mulberry Lane

| | | |
|---------------|-------------|-------------------|
| City Davis | State CA | Zip Code 95616 |
|---------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 11 | | 2011 |

Transaction ID : 3026232

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 25 |
|-----|---|----|

25

Janice Hahn Contributions

[MEMO ITEM]
MEMO

C. Mrs. Joan Eichberg
Full Name (Last, First, Middle Initial)
Mailing Address 8515 Costa Verde Blvd.
Unit 1412

| | | |
|-------------------|-------------|-------------------|
| City San Diego | State CA | Zip Code 92122 |
|-------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 11 | | 2011 |

Transaction ID : 3026237

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 25 |
|-----|---|----|

25

Janice Hahn Contributions

[MEMO ITEM]
MEMO

| | | | | |
|--|--|-----|---|----|
| SUBTOTAL of Receipts This Page (optional).....▶ | <table border="1"><tr><td>000</td><td>.</td><td>00</td></tr></table> | 000 | . | 00 |
| 000 | . | 00 | | |
| TOTAL This Period (last page this line number only).....▶ | <table border="1"><tr><td>000</td><td>.</td><td>00</td></tr></table> | 000 | . | 00 |
| 000 | . | 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 1331 OF 2452 |
| | <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. Barbara Garber

Mailing Address 14096 Huntington Pointe Dr.
#310

City Delray Beach State FL Zip Code 33484

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2011

Transaction ID : 3026798

Amount of Each Receipt this Period
20

Janice Hahn Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Ms. Joan L. Coles

Mailing Address 1357 3rd Avenue

City Salt Lake City State UT Zip Code 84103

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2011

Transaction ID : 3027290

Amount of Each Receipt this Period
150

Janice Hahn Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Mrs. Rebecca Peterson

Mailing Address 6715 South Military Trail

City Lake Worth State FL Zip Code 33463

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2011

Transaction ID : 3027422

Amount of Each Receipt this Period
25

Janice Hahn Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1332 OF 2452 (check only one) |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Miss Megan Thomas

Mailing Address 2734 Mountain View Dr.

| | | |
|------------------|-------------|-------------------|
| City La Verne | State CA | Zip Code 91750 |
|------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 15 / 2011

Transaction ID : 3029268

Amount of Each Receipt this Period
100

Janice Hahn Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Ms. Mae Rufert

Mailing Address 304 Crow Canyon Drive

| | | |
|----------------|-------------|-------------------|
| City Folsom | State CA | Zip Code 95630 |
|----------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 19 / 2011

Transaction ID : 3030309

Amount of Each Receipt this Period
25

Janice Hahn Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Mr. Robert J. Cloud

Mailing Address 2400 Donovan Avenue #38A

| | | |
|--------------------|-------------|-------------------|
| City Bellingham | State WA | Zip Code 98225 |
|--------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 19 / 2011

Transaction ID : 3030319

Amount of Each Receipt this Period
50

Janice Hahn Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1333 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Shirley Lindquist
 Full Name (Last, First, Middle Initial)
 Mailing Address 6555 Parkpoint Way NE
 City Seattle State WA Zip Code 98115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation retired teacher
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024226
 Amount of Each Receipt this Period
 10
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Ms. Kaye Paauw
 Full Name (Last, First, Middle Initial)
 Mailing Address 16622 NE 19th Place
 City Bellevue State WA Zip Code 98008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cranbrook Educational Community Bloomf Occupation retired teacher
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2011
Transaction ID : 3026802
 Amount of Each Receipt this Period
 30
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Ms. Barbara T Northam
 Full Name (Last, First, Middle Initial)
 Mailing Address 4217 Whitacre Rd.
 City Fairfax State VA Zip Code 22032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self; RE/MAX Choice Occupation self-employed, real
 Receipt For: Primary General Other (specify)

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2011
Transaction ID : 3025209
 Amount of Each Receipt this Period
 100
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1334 OF 2452 |
| | (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. Nancy T Jerome
Full Name (Last, First, Middle Initial)
Mailing Address 271 Brewer Avenue
City Winter Park State FL Zip Code 32789
FEC ID number of contributing federal political committee. **C**
Name of Employer free lance Occupation singer actor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022101
Amount of Each Receipt this Period **50**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

B. Ms. Judith Tanter
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 311
City Beverly Shores State IN Zip Code 46301
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Social Worker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022062
Amount of Each Receipt this Period **20**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

C. Ms. Carole M. Johnson
Full Name (Last, First, Middle Initial)
Mailing Address 466 Milcrip Road
City Bridgewater State NJ Zip Code 8807
FEC ID number of contributing federal political committee. **C**
Name of Employer free lance person Occupation teacher
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3021803
Amount of Each Receipt this Period **100**
Janice Hahn Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1335 OF 2452 |
| | <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. Mrs. Nancy J. Hardy
Full Name (Last, First, Middle Initial)

Mailing Address 12721 Golf View Drive

City State Zip Code
Huntley IL 60142

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

Name of Employer Occupation
Elgin U-46 Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
07 / 05 / 2011

Transaction ID : 3023034

Amount of Each Receipt this Period
25

Janice Hahn Contributions

[MEMO ITEM]
MEMO

B. Mrs. Sylvia Campbell
Full Name (Last, First, Middle Initial)

Mailing Address 79 W Glen Road

City State Zip Code
Denville NJ 07834

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

Name of Employer Occupation
None Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
07 / 05 / 2011

Transaction ID : 3023123

Amount of Each Receipt this Period
50

Janice Hahn Contributions

[MEMO ITEM]
MEMO

C. Mr. Neil Elliott
Full Name (Last, First, Middle Initial)

Mailing Address 3215 Cliff Drive

City State Zip Code
Santa Barbara CA 93109

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

Name of Employer Occupation
None Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
07 / 06 / 2011

Transaction ID : 3024330

Amount of Each Receipt this Period
15

Janice Hahn Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1336 OF 2452 |
| | <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. ann kirkpatrick
 Full Name (Last, First, Middle Initial)
 Mailing Address 432 W Cattle Drive Trail
 City Flagstaff State AZ Zip Code 86001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation unemployed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 09 / 2011**
Transaction ID : 3025446
 Amount of Each Receipt this Period **30**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Dr. Cordelia Ontiveros
 Full Name (Last, First, Middle Initial)
 Mailing Address 1450 E. North Hills Dr.
 City La Habra State CA Zip Code 90631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer California State University Occupation University Administr
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024320
 Amount of Each Receipt this Period **100**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

C. Ms. Yvonne E. Pine
 Full Name (Last, First, Middle Initial)
 Mailing Address 1508 Milan Ave.
 City So. Pasadena State CA Zip Code 91030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Volunteer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022053
 Amount of Each Receipt this Period **100**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1337 OF 2452 |
| | <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. Amy Thomson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1505 SW Alaska St.
 City Seattle State WA Zip Code 98106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self employed Occupation WRiter
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 12 / 2011**
Transaction ID : 3027073
 Amount of Each Receipt this Period **25**
 Janice Hahn Contributions
[MEMO ITEM]
 MEMO

B. Ms. Liz L. Gracie
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 N La Salle St Ste 4100
 City Chicago State IL Zip Code 60602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer O'Keefe Lyons & Hynes Occupation Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 15 / 2011**
Transaction ID : 3029264
 Amount of Each Receipt this Period **300**
 Kirsten Gillibrand Contributions
[MEMO ITEM]
 MEMO

C. John Auyong
 Full Name (Last, First, Middle Initial)
 Mailing Address 835 1/2 South Sycamore Avenue
 City Los Angeles State CA Zip Code 90036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Social Security Administration Occupation Attorney Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 03 / 2011**
Transaction ID : 3021671
 Amount of Each Receipt this Period **10**
 Kirsten Gillibrand Contributions
[MEMO ITEM]
 MEMO

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1338 OF 2452 |
| | <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. Eva K. Grove
Full Name (Last, First, Middle Initial)
Mailing Address 171 Main St #278

| | | |
|-------------------|-------------|-------------------|
| City Los Altos | State CA | Zip Code 94022 |
|-------------------|-------------|-------------------|

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

| | |
|-------------------------|-------------------------|
| Name of Employer n/a | Occupation homemaker |
|-------------------------|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 03 | | 2011 |

Transaction ID : 3021829

Amount of Each Receipt this Period

| |
|------|
| 1500 |
|------|

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

B. Ms. Nan Guslander
Full Name (Last, First, Middle Initial)
Mailing Address 5501A Balcones Drive

| | | |
|----------------|-------------|-------------------|
| City Austin | State TX | Zip Code 78731 |
|----------------|-------------|-------------------|

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

| | |
|--------------------------|------------------------|
| Name of Employer Self | Occupation investor |
|--------------------------|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 18 | | 2011 |

Transaction ID : 3029482

Amount of Each Receipt this Period

| |
|-----|
| 100 |
|-----|

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

C. Mr. Jason Kemp
Full Name (Last, First, Middle Initial)
Mailing Address 10 8th Ave

| | | |
|-------------------|-------------|-------------------|
| City Waterford | State CT | Zip Code 06385 |
|-------------------|-------------|-------------------|

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

| | |
|--|------------------------------------|
| Name of Employer State of Connecticut | Occupation Judicial Branch Empl |
|--|------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 28 | | 2011 |

Transaction ID : 3035633

Amount of Each Receipt this Period

| |
|-----|
| 100 |
|-----|

Kirsten Gillibrand Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1339 OF 2452 |
| | <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. John Jevitts
 Full Name (Last, First, Middle Initial)
 Mailing Address 97 North Main Street
 City West Hartford State CT Zip Code 06107
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2011
Transaction ID : 3021711
 Amount of Each Receipt this Period
 5
 Kirsten Gillibrand Contributions
[MEMO ITEM]
 MEMO

B. Mr. Ted Gavin
 Full Name (Last, First, Middle Initial)
 Mailing Address 3188 Laughead Lane
 City Garnet Valley State PA Zip Code 19060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gavin Corp Occupation Professional
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2011
Transaction ID : 3027697
 Amount of Each Receipt this Period
 1200
 Kirsten Gillibrand Contributions
[MEMO ITEM]
 MEMO

C. Mr. Andrew Grove
 Full Name (Last, First, Middle Initial)
 Mailing Address 171 Main St #278
 City Los Altos State CA Zip Code 94022
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 03 / 2011
Transaction ID : 3021704
 Amount of Each Receipt this Period
 1500
 Kirsten Gillibrand Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1340 OF 2452 |
| | <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. Dolores Chase
Full Name (Last, First, Middle Initial)
Mailing Address 1235 E. 200 So. #402
#402
City SLC State UT Zip Code 84102
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 ▼ 0

Date of Receipt 07 / 10 / 2011
Transaction ID : 3025520
Amount of Each Receipt this Period 25
Kirsten Gillibrand Contributions
[MEMO ITEM]
MEMO

B. Ms. Mary Ann Schwarzbach
Full Name (Last, First, Middle Initial)
Mailing Address 1620 Pankow Dr
City Geneva State IL Zip Code 60134
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 ▼ 0

Date of Receipt 07 / 15 / 2011
Transaction ID : 3029263
Amount of Each Receipt this Period 150
Kirsten Gillibrand Contributions
[MEMO ITEM]
MEMO

C. Mrs. Emiy B. Rutherford
Full Name (Last, First, Middle Initial)
Mailing Address 2862 Raccoon Valley
City Granville State OH Zip Code 43023
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 ▼ 0

Date of Receipt 07 / 19 / 2011
Transaction ID : 3029813
Amount of Each Receipt this Period 111.11
Kirsten Gillibrand Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1341 OF 2452 |
| | <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. 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 N/A Occupation Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 27 / 2011**
Transaction ID : 3035045
 Amount of Each Receipt this Period **100**
 Kirsten Gillibrand Contributions
[MEMO ITEM]
 MEMO

B. Ms. Shirley Lindquist
 Full Name (Last, First, Middle Initial)
 Mailing Address 6555 Parkpoint Way NE
 City Seattle State WA Zip Code 98115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation retired teacher
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024224
 Amount of Each Receipt this Period **10**
 Kirsten Gillibrand Contributions
[MEMO ITEM]
 MEMO

C. ann kirkpatrick
 Full Name (Last, First, Middle Initial)
 Mailing Address 432 W Cattle Drive Trail
 City Flagstaff State AZ Zip Code 86001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation unemployed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 09 / 2011**
Transaction ID : 3025444
 Amount of Each Receipt this Period **30**
 Kirsten Gillibrand Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1342 OF 2452 (check only one) |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Amy Thomson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1505 SW Alaska St.
 City Seattle State WA Zip Code 98106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self employed Occupation WRiter
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 0

Date of Receipt 07 / 12 / 2011
Transaction ID : 3027074
 Amount of Each Receipt this Period 50
 Kirsten Gillibrand Contributions
[MEMO ITEM]
 MEMO

B. John Auyong
 Full Name (Last, First, Middle Initial)
 Mailing Address 835 1/2 South Sycamore Avenue
 City Los Angeles State CA Zip Code 90036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Social Security Administration Occupation Attorney Advisor
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 0

Date of Receipt 07 / 03 / 2011
Transaction ID : 3021673
 Amount of Each Receipt this Period 10
 Lois Frankel Contributions
[MEMO ITEM]
 MEMO

C. Ms. Nan Mullins
 Full Name (Last, First, Middle Initial)
 Mailing Address 505 Port Royal Way
 City Pensacola State FL Zip Code 32502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation Dentist
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 0

Date of Receipt 07 / 25 / 2011
Transaction ID : 3032858
 Amount of Each Receipt this Period 100
 Lois Frankel Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1343 OF 2452 |
| | <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. Nan Guslander
Full Name (Last, First, Middle Initial)
Mailing Address 5501A Balcones Drive

| | | |
|----------------|-------------|-------------------|
| City Austin | State TX | Zip Code 78731 |
|----------------|-------------|-------------------|

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

| | |
|--------------------------|------------------------|
| Name of Employer Self | Occupation investor |
|--------------------------|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 18 | | 2011 |

Transaction ID : 3029486

Amount of Each Receipt this Period

| |
|----|
| 50 |
|----|

Lois Frankel Contributions

[MEMO ITEM]
MEMO

B. charmel stokes
Full Name (Last, First, Middle Initial)
Mailing Address 702 Castlewoods Blvd.

| | | |
|-----------------|-------------|-------------------|
| City Brandon | State MS | Zip Code 39047 |
|-----------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 20 | | 2011 |

Transaction ID : 3030955

Amount of Each Receipt this Period

| |
|-----|
| 100 |
|-----|

Lois Frankel Contributions

[MEMO ITEM]
MEMO

C. Ms. Julie Brown
Full Name (Last, First, Middle Initial)
Mailing Address 3730 E. Kirkwood Ave.

| | | |
|----------------|-------------|-------------------|
| City Orange | State CA | Zip Code 92869 |
|----------------|-------------|-------------------|

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

| | |
|---|-------------------------|
| Name of Employer Memorial medical foundation | Occupation Physician |
|---|-------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 20 | | 2011 |

Transaction ID : 3031088

Amount of Each Receipt this Period

| |
|----|
| 50 |
|----|

Lois Frankel Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1344 OF 2452 |
| | <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. Helen B Lee
Full Name (Last, First, Middle Initial)
Mailing Address 12551 Sunbreak Way Ne
City Redmond State WA Zip Code 98053
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 **0**

Date of Receipt **07 / 21 / 2011**
Transaction ID : 3031988
Amount of Each Receipt this Period **100**
Lois Frankel Contributions
[MEMO ITEM]
MEMO

B. Ms. Karen J. Keefer
Full Name (Last, First, Middle Initial)
Mailing Address 1720 Valota Road
City Redwood City State CA Zip Code 94061
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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3021770
Amount of Each Receipt this Period **100**
Lois Frankel Contributions
[MEMO ITEM]
MEMO

C. Stephen Claypool
Full Name (Last, First, Middle Initial)
Mailing Address 114 LIBERTY LN
City ROCKWALL State TX Zip Code 75032
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 **0**

Date of Receipt **07 / 20 / 2011**
Transaction ID : 3030670
Amount of Each Receipt this Period **10**
Lois Frankel Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1345 OF 2452 |
| | <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. Ali Kroll
 Full Name (Last, First, Middle Initial)
 Mailing Address 75795 heritage west
 City State Zip Code
 Palm desert CA 92211
 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 ▼
 0

Date of Receipt
 07 / 20 / 2011
Transaction ID : 3030817
 Amount of Each Receipt this Period
 25
 Lois Frankel Contributions
[MEMO ITEM]
 MEMO

B. April Ewaskey
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 92674
 City State Zip Code
 Long Beach CA 90809
 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 ▼
 0

Date of Receipt
 07 / 21 / 2011
Transaction ID : 3031745
 Amount of Each Receipt this Period
 20
 Lois Frankel Contributions
[MEMO ITEM]
 MEMO

C. Mona SHABELMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 21559 Cypress Hammock Dr.
 City State Zip Code
 Boca Raton FL 33428
 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 ▼
 0

Date of Receipt
 07 / 23 / 2011
Transaction ID : 3032256
 Amount of Each Receipt this Period
 25
 Lois Frankel Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1346 OF 2452 |
| | <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. Liddy Wilson
Full Name (Last, First, Middle Initial)
Mailing Address 5801 C Sharon Rd
City Charlotte State NC Zip Code 28210
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 **0**

Date of Receipt **07 / 23 / 2011**
Transaction ID : 3032292
Amount of Each Receipt this Period **5**
Lois Frankel Contributions
[MEMO ITEM]
MEMO

B. Ms. Elizabeth I. Adler
Full Name (Last, First, Middle Initial)
Mailing Address 520 17th St.
City Santa Monica State CA Zip Code 90402
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 **0**

Date of Receipt **07 / 25 / 2011**
Transaction ID : 3032784
Amount of Each Receipt this Period **50**
Lois Frankel Contributions
[MEMO ITEM]
MEMO

C. 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 N/A Occupation Retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0**

Date of Receipt **07 / 27 / 2011**
Transaction ID : 3035054
Amount of Each Receipt this Period **100**
Lois Frankel Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1347 OF 2452 |
| <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. Joseph D'Urso
Full Name (Last, First, Middle Initial)

Mailing Address #6 newman village condos

City State Zip Code
bridgehampton NY 11932

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

Name of Employer Occupation
d'urso design, inc. self-employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
07 / 29 / 2011

Transaction ID : 3035750

Amount of Each Receipt this Period
25

Lois Frankel Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 1563 De Anza Way

City State Zip Code
San Jose CA 95125

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

Name of Employer Occupation
IBM Software engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
07 / 20 / 2011

Transaction ID : 3030640

Amount of Each Receipt this Period
100

Lois Frankel Contributions

[MEMO ITEM]
MEMO

C. Ms. Hedy M Ratner
Full Name (Last, First, Middle Initial)

Mailing Address 1960 Lincoln Park West #2301

City State Zip Code
Chicago IL 60614

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

Name of Employer Occupation
Women's Business Development Center Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
07 / 05 / 2011

Transaction ID : 3023021

Amount of Each Receipt this Period
50

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1348 OF 2452 |
| | <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. Jerry A. Ellis
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 544
 City Long Beach State WA Zip Code 98631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Washington State Occupation Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024612
 Amount of Each Receipt this Period
 100
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

B. Ms. Linda L. Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 5475 Wingborne Ct
 City Columbia State MD Zip Code 21045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SSA Occupation Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024634
 Amount of Each Receipt this Period
 50
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

C. Mrs. Susan S. Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1265 NW Heather Drive
 City Corvallis State OR Zip Code 97330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Artist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 05 / 2011
Transaction ID : 3023057
 Amount of Each Receipt this Period
 60
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1349 OF 2452 |
| <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. Mrs. Bette S. Paris
Full Name (Last, First, Middle Initial)
Mailing Address 607 N. Arden Drive

| | | |
|-----------------------|-------------|-------------------|
| City Beverly Hills | State CA | Zip Code 90210 |
|-----------------------|-------------|-------------------|

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

| | |
|--------------------------|------------------------|
| Name of Employer Self | Occupation Attorney |
|--------------------------|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 05 | | 2011 |

Transaction ID : 3023099

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 00 |
|-----|---|----|

50

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Ms. E. Marianne Gabel
Full Name (Last, First, Middle Initial)
Mailing Address 49 forest ave.

| | | |
|------------------|-------------|-------------------|
| City Delaware | State OH | Zip Code 43015 |
|------------------|-------------|-------------------|

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

| | |
|-----------------------------------|------------------------|
| Name of Employer self employed | Occupation Attorney |
|-----------------------------------|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 08 | | 2011 |

Transaction ID : 3025434

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 00 |
|-----|---|----|

500

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. John Auyong
Full Name (Last, First, Middle Initial)
Mailing Address 835 1/2 South Sycamore Avenue

| | | |
|---------------------|-------------|-------------------|
| City Los Angeles | State CA | Zip Code 90036 |
|---------------------|-------------|-------------------|

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

| | |
|--|--------------------------------|
| Name of Employer Social Security Administration | Occupation Attorney Advisor |
|--|--------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 03 | | 2011 |

Transaction ID : 3021682

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 00 |
|-----|---|----|

10

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1350 OF 2452 |
| | <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. Patricia L Dedert
Full Name (Last, First, Middle Initial)
Mailing Address 800 Atkinson Circle
City Hillsborough State NJ Zip Code 08844
FEC ID number of contributing federal political committee. **C**
Name of Employer ExxonMobil Research & Engineering Col Occupation Chemist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 02 / 2011
Transaction ID : 3021798
Amount of Each Receipt this Period 50
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

B. Ms. Helen Meola
Full Name (Last, First, Middle Initial)
Mailing Address 255 Massachusetts Avenue Apartment 203
City Boston State MA Zip Code 2115
FEC ID number of contributing federal political committee. **C**
Name of Employer Brigham & Women's Hospital Occupation Clerical
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 26 / 2011
Transaction ID : 3035110
Amount of Each Receipt this Period 250
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

C. Ms. Connie Clement
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1454
City Ponca City State OK Zip Code 74602
FEC ID number of contributing federal political committee. **C**
Name of Employer USPS Occupation Clerk
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 25 / 2011
Transaction ID : 3032766
Amount of Each Receipt this Period 50
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1351 OF 2452 |
| | <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

A. Ms. Margaret W. Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 9190 Brier Rd.
 City La Mesa State CA Zip Code 91942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Grossmont College Occupation College Instructor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024609
 Amount of Each Receipt this Period **50**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

B. Mr. Kicab Castaneda-Mendez
 Full Name (Last, First, Middle Initial)
 Mailing Address 112 Rhododendron CT
 City Chapel Hill State NC Zip Code 27517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 02 / 2011**
Transaction ID : 3021794
 Amount of Each Receipt this Period **25**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

C. Ms. Cynthia Linton
 Full Name (Last, First, Middle Initial)
 Mailing Address 990 N. Lake Shore Dr., 15E
 City Chicago State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026200
 Amount of Each Receipt this Period **100**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1352 OF 2452 |
| | <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. Thomas H. Logan
Full Name (Last, First, Middle Initial)

Mailing Address 505 College Avenue, S.E.

City Grand Rapids State MI Zip Code 49503

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

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : 3026213

Amount of Each Receipt this Period
100

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Ms. Joan Dolan Biblo
Full Name (Last, First, Middle Initial)

Mailing Address 8707 Riggs Lane # 4

City Overland Park State KS Zip Code 66212

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

Name of Employer Self Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2011

Transaction ID : 3026781

Amount of Each Receipt this Period
50

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Ms. Amy Sherman Palladino
Full Name (Last, First, Middle Initial)

Mailing Address 15260 Ventura #1040

City Sherman Oaks State CA Zip Code 91403

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

Name of Employer Warner Bros (Gilmore Girls) Occupation Creator/Director/Producer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2011

Transaction ID : 3031656

Amount of Each Receipt this Period
1000

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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

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

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| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 1353 OF 2452 |
| | <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. Mary Schieffer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3913 West Forest Home Avenue
 City Milwaukee State WI Zip Code 53215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Milwaukee Police Dept. Occupation Detective
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 18 / 2011**
Transaction ID : 3029424
 Amount of Each Receipt this Period **50**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

B. Dr. Lisa M. Schwerdt
 Full Name (Last, First, Middle Initial)
 Mailing Address 5337 California Ave
 City Bethel Park State PA Zip Code 15102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer California Univ. of Penn. Occupation English Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 22 / 2011**
Transaction ID : 3032354
 Amount of Each Receipt this Period **10**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

C. Mr. Ken Harstad
 Full Name (Last, First, Middle Initial)
 Mailing Address 12719 Shenley Street
 City Sylmar State CA Zip Code 91342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer JPL Pasadena CA Occupation Engr.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026242
 Amount of Each Receipt this Period **200**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1354 OF 2452 |
| | <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. Tammy D. McLeod | | Date of Receipt MM / DD / YYYY 07 / 20 / 2011 |
| Mailing Address 5428 E. Sanna Street | | Transaction ID : 3031027 |
| City Paradise Valley | State AZ | Zip Code 85253 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100 | |
| Name of Employer Arizona Public Service | Occupation executive | Maria Cantwell Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Ms. Catherine Wyler | | Date of Receipt MM / DD / YYYY 07 / 21 / 2011 |
| Mailing Address 3917 Watson Place, NW | | Transaction ID : 3031985 |
| City Washington | State DC | Zip Code 20016 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 200 | |
| Name of Employer Catherine Wyler Prods. Inc. | Occupation Film/TV Producer | Maria Cantwell Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Ms. Debra Fried Levin | | Date of Receipt MM / DD / YYYY 07 / 18 / 2011 |
| Mailing Address 6304 31 Place, NW | | Transaction ID : 3029430 |
| City Washington | State DC | Zip Code 20015 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100 | |
| Name of Employer Self | Occupation fund-raiser | Maria Cantwell Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1355 OF 2452 |
| | <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. Lisa Kaplowitz
Full Name (Last, First, Middle Initial)

Mailing Address 2228 King Street

City Alexandria State VA Zip Code 22301

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

Name of Employer Virginia Dept of Health Occupation Health Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 07 / 2011**

Transaction ID : 3025211

Amount of Each Receipt this Period **250**

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Ms. Janice E. Savidge
Full Name (Last, First, Middle Initial)

Mailing Address 4955 Makena Rd Apt D301

City Kihei State HI Zip Code 96753

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

Name of Employer n/a Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 06 / 2011**

Transaction ID : 3024295

Amount of Each Receipt this Period **200**

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Mrs. Jo Denton Tuck
Full Name (Last, First, Middle Initial)

Mailing Address 4242 Lomo Alto Drive, Apt S28

City Dallas State TX Zip Code 75219

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

Name of Employer n/a Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 06 / 2011**

Transaction ID : 3024626

Amount of Each Receipt this Period **100**

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1356 OF 2452 (check only one) |
| <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

A. Mrs. Martha H. Talbot
 Full Name (Last, First, Middle Initial)
 Mailing Address 6656 Chilton Court
 City McLean State VA Zip Code 22101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025637
 Amount of Each Receipt this Period **1000**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

B. Ms. Marilyn H. Grimes
 Full Name (Last, First, Middle Initial)
 Mailing Address 3302 Hickory Brook Lane
 City Kingwood State TX Zip Code 77345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025645
 Amount of Each Receipt this Period **100**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

C. Ms. Jenny Bateman Mudge
 Full Name (Last, First, Middle Initial)
 Mailing Address 2614 Ellentown Road
 City La Jolla State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 22 / 2011**
Transaction ID : 3032484
 Amount of Each Receipt this Period **500**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1357 OF 2452 |
| | <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. Shirley A. Beck
Full Name (Last, First, Middle Initial)

Mailing Address 5515 64th Court SE

City Olympia State WA Zip Code 98513

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

Name of Employer n/a Occupation Housewife

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
07 / 21 / 2011

Transaction ID : 3032013

Amount of Each Receipt this Period
50

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 1020 n monroe st

City tacoma State WA Zip Code 98406

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

Name of Employer puget sound blood center Occupation IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
07 / 26 / 2011

Transaction ID : 3032956

Amount of Each Receipt this Period
10

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Ms. Bonnie W. Eisenfeld
Full Name (Last, First, Middle Initial)

Mailing Address 2031 Locust Street, Apt. 402

City Philadelphia State PA Zip Code 19103

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

Name of Employer Self Occupation Market Research Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
07 / 06 / 2011

Transaction ID : 3024642

Amount of Each Receipt this Period
50

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1358 OF 2452 |
| | <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

A. Ms. Clare Vincent
 Full Name (Last, First, Middle Initial)
 Mailing Address 326 East 85th Street, Apt G
 City New York State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Metro. Museum Of Art Occupation Museum Curator
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 22 / 2011**
Transaction ID : 3031645
 Amount of Each Receipt this Period **50**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

B. Ms. Lois E. Gullerud
 Full Name (Last, First, Middle Initial)
 Mailing Address 1208 W. Daniel
 City Champaign State IL Zip Code 61821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Musician
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 15 / 2011**
Transaction ID : 3029050
 Amount of Each Receipt this Period **100**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

C. John Jevitts
 Full Name (Last, First, Middle Initial)
 Mailing Address 97 North Main Street
 City West Hartford State CT Zip Code 06107
 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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3021713
 Amount of Each Receipt this Period **5**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1359 OF 2452 |
| <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. Joan Creigh Little
Full Name (Last, First, Middle Initial)

Mailing Address 11986 Alpine Terrace

City San Diego State CA Zip Code 92128

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2011

Transaction ID : 3021786

Amount of Each Receipt this Period
 10

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Ms. Janet P Wolf
Full Name (Last, First, Middle Initial)

Mailing Address 2465 SW Timberline Dr

City Portland State OR Zip Code 97225

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2011

Transaction ID : 3025501

Amount of Each Receipt this Period
 50

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Ms. Judith Krantz
Full Name (Last, First, Middle Initial)

Mailing Address 166 Groverton Pl

City Los Angeles State CA Zip Code 90077

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

Name of Employer Self Occupation Novelist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2011

Transaction ID : 3035888

Amount of Each Receipt this Period
 2500

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1360 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Joy Silver
Full Name (Last, First, Middle Initial)
Mailing Address 1059 W Skylark Drive
City Palatine State IL Zip Code 60067
FEC ID number of contributing federal political committee. **C**
Name of Employer Drs. Bedingfield and Rosen Occupation Pediatrician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 15 / 2011
Transaction ID : 3029041
Amount of Each Receipt this Period 50
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

B. Ms. Mildred Weissman
Full Name (Last, First, Middle Initial)
Mailing Address 81 Manursing Way
City Rye State NY Zip Code 10580
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Philanthropist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 06 / 2011
Transaction ID : 3024291
Amount of Each Receipt this Period 1000
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

C. Ms. Cheryl C. Farmer
Full Name (Last, First, Middle Initial)
Mailing Address 214 N. Huron Street, #1
City Ypsilanti State MI Zip Code 48197
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 15 / 2011
Transaction ID : 3029038
Amount of Each Receipt this Period 100
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1361 OF 2452 |
| | <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. 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 GA Health Sciencea Univ Occupation Physician/educator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 21 / 2011**
Transaction ID : 3032012
Amount of Each Receipt this Period **100**
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

B. Ms. Carolyn W. Sanger
Full Name (Last, First, Middle Initial)
Mailing Address 4331 N. Camino de Carrillo
City Tucson State AZ Zip Code 85750
FEC ID number of contributing federal political committee. **C**
Name of Employer Piles of Paper? self-employed Occupation Professional Organiz
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022075
Amount of Each Receipt this Period **50**
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

C. Ms. Jean Stapleton
Full Name (Last, First, Middle Initial)
Mailing Address 3232 Philo St.
City Los Angeles State CA Zip Code 90064
FEC ID number of contributing federal political committee. **C**
Name of Employer East Los Angeles College Occupation Professor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 10 / 2011**
Transaction ID : 3025519
Amount of Each Receipt this Period **50**
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1362 OF 2452 |
| | <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. Esther M. Conwell | | Date of Receipt MM / DD / YYYY 07 / 20 / 2011 Transaction ID : 3030591 |
| Mailing Address 340 Pelham Road | | Amount of Each Receipt this Period 200 Maria Cantwell Contributions |
| City Rochester State NY Zip Code 14610 | FEC ID number of contributing federal political committee. C | [MEMO ITEM] MEMO |
| Name of Employer univ of rochester Occupation PROFESSOR | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Ms. Donna Bahry Bartlett | | Date of Receipt MM / DD / YYYY 07 / 26 / 2011 Transaction ID : 3035101 |
| Mailing Address 628 Fairway Road | | Amount of Each Receipt this Period 100 Maria Cantwell Contributions |
| City State College State PA Zip Code 16803 | FEC ID number of contributing federal political committee. C | [MEMO ITEM] MEMO |
| Name of Employer Penn State University Occupation Professor | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. Dr. Marion Taylor Taylor Baer | | Date of Receipt MM / DD / YYYY 07 / 28 / 2011 Transaction ID : 3035691 |
| Mailing Address 3636 Corinth Ave | | Amount of Each Receipt this Period 25 Maria Cantwell Contributions |
| City Los Angeles State CA Zip Code 90066 | FEC ID number of contributing federal political committee. C | [MEMO ITEM] MEMO |
| Name of Employer USC Occupation Professor | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 |

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| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | 0.00 |

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

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| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 1363 OF 2452 |
| <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. Dr. Wendy Santin Rapaport
Full Name (Last, First, Middle Initial)
Mailing Address 19372cedar glen dr
City Boca Raton State FL Zip Code 33434
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Psychologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 11 / 2011
Transaction ID : 3026167
Amount of Each Receipt this Period 10
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

B. Dr. Lloyd Meadow
Full Name (Last, First, Middle Initial)
Mailing Address 355 Oak Park Drive
City San Francisco State CA Zip Code 94131
FEC ID number of contributing federal political committee. **C**
Name of Employer self employed Occupation psychologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 12 / 2011
Transaction ID : 3027126
Amount of Each Receipt this Period 50
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

C. Ms. Martha Schoenemann
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 216
City Pawlet State VT Zip Code 5761
FEC ID number of contributing federal political committee. **C**
Name of Employer Bob Schoenemann RE Service Occupation Real Estate
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 26 / 2011
Transaction ID : 3035095
Amount of Each Receipt this Period 50
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

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| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 1364 OF 2452 |
| | (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

A. Ms. Ann Nichols
Full Name (Last, First, Middle Initial)
Mailing Address 418 Wilson Street

| | | |
|----------------|-------------|-------------------|
| City Winona | State MN | Zip Code 55987 |
|----------------|-------------|-------------------|

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

| | |
|-----------------------------|----------------------|
| Name of Employer retired | Occupation reired |
|-----------------------------|----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 15 | / | 2011 |

Transaction ID : 3029010

Amount of Each Receipt this Period

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|-----|---|----|
| 000 | . | 00 |
|-----|---|----|

100

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Ms. Susanne M. Yokel
Full Name (Last, First, Middle Initial)
Mailing Address 8208 Fenway Road

| | | |
|------------------|-------------|-------------------|
| 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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 01 | / | 2011 |

Transaction ID : 3021822

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 25 |
|-----|---|----|

25

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Ms. Margret Jacoby
Full Name (Last, First, Middle Initial)
Mailing Address 912 Blossom Drive

| | | |
|---------------------|-------------|-------------------|
| City Santa Clara | State CA | Zip Code 95050 |
|---------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 01 | / | 2011 |

Transaction ID : 3022076

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 00 |
|-----|---|----|

100

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1365 OF 2452 |
| | <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. Elaine F. Marshack
Full Name (Last, First, Middle Initial)

Mailing Address 4 Washingtqn Square Vlg
Apt. 13A

City New York State NY Zip Code 10012

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 ▼ **0**

Date of Receipt
07 / 05 / 2011

Transaction ID : 3023063

Amount of Each Receipt this Period
50

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Ms. Barbara Gorenstein
Full Name (Last, First, Middle Initial)

Mailing Address 1919 Chestnut Street, # 917

City Philadelphia State PA Zip Code 19103

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 ▼ **0**

Date of Receipt
07 / 05 / 2011

Transaction ID : 3023066

Amount of Each Receipt this Period
15

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Ms. Gayle I. Moore
Full Name (Last, First, Middle Initial)

Mailing Address 3115 Mauricia Avenue

City Santa Clara State CA Zip Code 95051

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 ▼ **0**

Date of Receipt
07 / 05 / 2011

Transaction ID : 3023125

Amount of Each Receipt this Period
25

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1366 OF 2452 |
| | <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 Pinkerton

Mailing Address 800 Kimberton Rd Apt J3

City State Zip Code
Phoenixville PA 19460

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 05 / 2011

Transaction ID : 3023135

Amount of Each Receipt this Period
10

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Ms. Sue Holland

Mailing Address 3502 65th Avenue W.

City State Zip Code
Tacoma WA 98466

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 06 / 2011

Transaction ID : 3024632

Amount of Each Receipt this Period
30

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
c. Ms. Cheryl Ziegenfuss

Mailing Address 1036 Woodland Dr.

City State Zip Code
Sunbury PA 17801

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 06 / 2011

Transaction ID : 3024666

Amount of Each Receipt this Period
25

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1367 OF 2452 |
| | <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. Nancy Van Roekens
Full Name (Last, First, Middle Initial)

Mailing Address 5300 Ocean Blvd. #201

City Sarasota State FL Zip Code 34242

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 06 / 2011

Transaction ID : 3024669

Amount of Each Receipt this Period
50

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Mr. Patrick McIntosh
Full Name (Last, First, Middle Initial)

Mailing Address 3885 Paseo Del Prado St

City Boulder State CO Zip Code 80301

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2011

Transaction ID : 3025671

Amount of Each Receipt this Period
60

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 43 Hedge Rd

City Brookline State MA Zip Code 02445

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : 3026162

Amount of Each Receipt this Period
50

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1368 OF 2452 |
| <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

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Muriel Tuteur | | Date of Receipt MM / DD / YYYY 07 / 11 / 2011 |
| Mailing Address 2093 Ronda Granada Unit A | | Transaction ID : 3026184 |
| City Laguna Woods | State CA | Zip Code 92637 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer REQUESTED | Occupation REQUESTED | Amount of Each Receipt this Period 25 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | Maria Cantwell Contributions |
| | | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Amy Crofts | | Date of Receipt MM / DD / YYYY 07 / 11 / 2011 |
| Mailing Address 605 E Court St | | Transaction ID : 3026191 |
| City Viroqua | State WI | Zip Code 54665 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer REQUESTED | Occupation REQUESTED | Amount of Each Receipt this Period 10 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | Maria Cantwell Contributions |
| | | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Lili Townsend | | Date of Receipt MM / DD / YYYY 07 / 11 / 2011 |
| Mailing Address 3288 Waileia Place | | Transaction ID : 3026235 |
| City Wailea | State HI | Zip Code 96753 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer REQUESTED | Occupation REQUESTED | Amount of Each Receipt this Period 100 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | Maria Cantwell Contributions |
| | | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1369 OF 2452 |
| | <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

A. Ms. Roberta M. Block
 Full Name (Last, First, Middle Initial)
 Mailing Address 54 Cornwall Ln.
 City Port Washington State NY Zip Code 11050
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2011
Transaction ID : 3026248
 Amount of Each Receipt this Period
 100
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

B. Ms. Jeanne D. Feldman
 Full Name (Last, First, Middle Initial)
 Mailing Address 18655 W. Bernardo Drive # 468
 City San Diego State CA Zip Code 92127
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2011
Transaction ID : 3026770
 Amount of Each Receipt this Period
 50
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

C. Ms. Dorothy Amato
 Full Name (Last, First, Middle Initial)
 Mailing Address 22149 Kensington Street
 City Taylor State MI Zip Code 48180
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2011
Transaction ID : 3026775
 Amount of Each Receipt this Period
 100
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1370 OF 2452 |
| | (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

A. Ms. Dawn Shaw
Full Name (Last, First, Middle Initial)

Mailing Address 705 Tanglewood Lane

City State Zip Code
Kerrville TX 78028

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 ▼
0

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2011

Transaction ID : 3026801

Amount of Each Receipt this Period
25

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Ms. Judith C. Gebera
Full Name (Last, First, Middle Initial)

Mailing Address 146 Grove St.

City State Zip Code
Tonawanda NY 14150

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 ▼
0

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2011

Transaction ID : 3026807

Amount of Each Receipt this Period
25

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 62 New York Avenue

City State Zip Code
Congers NY 10920

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 ▼
0

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2011

Transaction ID : 3026813

Amount of Each Receipt this Period
50

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1371 OF 2452 |
| | <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 Patton | | Date of Receipt MM / DD / YYYY 07 / 14 / 2011 Transaction ID : 3027426 |
| Mailing Address PO Box 427 5273 Kingston Road | | Amount of Each Receipt this Period 50 Maria Cantwell Contributions |
| City Elbridge | State NY | Zip Code 13060 |
| 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 ▼ 0 | |

[MEMO ITEM]
MEMO

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr. Harold Mills | | Date of Receipt MM / DD / YYYY 07 / 15 / 2011 Transaction ID : 3029059 |
| Mailing Address 12 Oakland Terrace | | Amount of Each Receipt this Period 10 Maria Cantwell Contributions |
| City Maplewood | State NJ | Zip Code 7040 |
| 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 ▼ 0 | |

[MEMO ITEM]
MEMO

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Mrs. Irma S. Samek | | Date of Receipt MM / DD / YYYY 07 / 18 / 2011 Transaction ID : 3029431 |
| Mailing Address 6568 Kings Creek Ter | | Amount of Each Receipt this Period 50 Maria Cantwell Contributions |
| City Boynton Beach | State FL | Zip Code 33437 |
| 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 ▼ 0 | |

[MEMO ITEM]
MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1372 OF 2452 |
| | (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

A. Mr. William Stockard
Full Name (Last, First, Middle Initial)
Mailing Address 2640 E Cardella Rd
City Merced State CA Zip Code 95340
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 **0**

Date of Receipt **07 / 18 / 2011**
Transaction ID : 3029581
Amount of Each Receipt this Period **60**
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

B. Mrs. Roslyn Levin
Full Name (Last, First, Middle Initial)
Mailing Address 4092 Peshurst Pike
City Sarasota State FL Zip Code 34235
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 **0**

Date of Receipt **07 / 19 / 2011**
Transaction ID : 3030301
Amount of Each Receipt this Period **100**
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

C. Ms. Virginia M. Krall
Full Name (Last, First, Middle Initial)
Mailing Address 3038 SE 21st Street
City Gresham State OR Zip Code 97080
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 **0**

Date of Receipt **07 / 20 / 2011**
Transaction ID : 3030590
Amount of Each Receipt this Period **50**
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1373 OF 2452 |
| | <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. Louise Stinchcomb
Full Name (Last, First, Middle Initial)
Mailing Address 11336 Terwilligers Valley Lane
City Cincinnati State OH Zip Code 45249
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 **0**

Date of Receipt **07 / 22 / 2011**
Transaction ID : 3031653
Amount of Each Receipt this Period **100**
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

B. Ms. Ellen Bell
Full Name (Last, First, Middle Initial)
Mailing Address 1213 Oak Bluff Court
City Westerville State OH Zip Code 43081
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 **0**

Date of Receipt **07 / 25 / 2011**
Transaction ID : 3032777
Amount of Each Receipt this Period **10**
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

C. Ms. Claire Mandeville
Full Name (Last, First, Middle Initial)
Mailing Address 91 Kitchell Lake Drive
City West Milford State NJ Zip Code 07480
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 **0**

Date of Receipt **07 / 28 / 2011**
Transaction ID : 3035467
Amount of Each Receipt this Period **5**
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1374 OF 2452 |
| | <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. Richard E Kronauer
 Full Name (Last, First, Middle Initial)
 Mailing Address 13811 E Langtry Ln
 City Tucson State AZ Zip Code 85747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Harvard Univ Occupation Research Prof
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023154
 Amount of Each Receipt this Period 50
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

B. Ms. Syd Cherney Clarke
 Full Name (Last, First, Middle Initial)
 Mailing Address 3615 Westover Rd.
 City Durham State NC Zip Code 27707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation retailer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 08 / 2011
Transaction ID : 3025535
 Amount of Each Receipt this Period 100
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

C. Ms. Dorothy Weinstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 2818 N. 46 Ave. K-492
 City Hollywood State FL Zip Code 33021
 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 ▼ 0

Date of Receipt 07 / 01 / 2011
Transaction ID : 3021746
 Amount of Each Receipt this Period 50
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1375 OF 2452 |
| | <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 Weinstock
Full Name (Last, First, Middle Initial)
Mailing Address 525 South Flagler Drive
City West Palm Beach State FL Zip Code 33401
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 ▼ 0

Date of Receipt 07 / 01 / 2011
Transaction ID : 3021751
Amount of Each Receipt this Period 100
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

B. Ms. Elaine Galinson
Full Name (Last, First, Middle Initial)
Mailing Address 7919 Prospect Pl
City La Jolla State CA Zip Code 92037
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 ▼ 0

Date of Receipt 07 / 01 / 2011
Transaction ID : 3021759
Amount of Each Receipt this Period 100
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

C. Ms. Margaret J J. DiClemente
Full Name (Last, First, Middle Initial)
Mailing Address 15357 Mutiny Ct
City Corpus Christi State TX Zip Code 78418
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 ▼ 0

Date of Receipt 07 / 01 / 2011
Transaction ID : 3021809
Amount of Each Receipt this Period 50
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1376 OF 2452 |
| | (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. Ms. Myra Ramos | | Date of Receipt MM / DD / YYYY 07 / 02 / 2011 Transaction ID : 3021847 |
| Mailing Address 2877 N. Nugent Rd. M-1 | | Amount of Each Receipt this Period 0.20 Maria Cantwell Contributions |
| City Lummi Island | State WA | Zip Code 98262 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer N/A | Occupation retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Mr. Robert Kansas | | Date of Receipt MM / DD / YYYY 07 / 01 / 2011 Transaction ID : 3022058 |
| Mailing Address 725 Robin Way S. | | Amount of Each Receipt this Period 0.50 Maria Cantwell Contributions |
| City Satellite Beach | State FL | Zip Code 32937 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Eleanor B. Silsby | | Date of Receipt MM / DD / YYYY 07 / 01 / 2011 Transaction ID : 3022071 |
| Mailing Address 65 South Street | | Amount of Each Receipt this Period 0.25 Maria Cantwell Contributions |
| City Granby | State MA | Zip Code 01033 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer N/A | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1377 OF 2452 |
| | <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 E. Kyle
Full Name (Last, First, Middle Initial)
Mailing Address 363 Cockle Place, SW
City Ocean Shores State WA Zip Code 98569
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 ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023009
Amount of Each Receipt this Period 100
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

B. Ms. Rose M. Laffoon
Full Name (Last, First, Middle Initial)
Mailing Address 20033 Greenwood Avenue N.
City Shoreline State WA Zip Code 98133
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 ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023043
Amount of Each Receipt this Period 50
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

C. Ms. Jane Walsh Gralen
Full Name (Last, First, Middle Initial)
Mailing Address 42 Durham Court
City Burr Ridge State IL Zip Code 60527
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 ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023096
Amount of Each Receipt this Period 75
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1378 OF 2452 |
| | <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. Sherry L. Haagenson
Full Name (Last, First, Middle Initial)

Mailing Address 1112 S. Rio Vista Blvd.

City Fort Lauderdale State FL Zip Code 33316

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 ▼ **0**

Date of Receipt
07 / 05 / 2011

Transaction ID : 3023121

Amount of Each Receipt this Period
50

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Ms. Francis E. Rohde
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 2830

City Chesapeake State VA Zip Code 23327

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 ▼ **0**

Date of Receipt
07 / 05 / 2011

Transaction ID : 3023131

Amount of Each Receipt this Period
50

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Ms. Diane Drayson
Full Name (Last, First, Middle Initial)

Mailing Address 3750 Tremont Lane

City Ann Arbor State MI Zip Code 48105

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 ▼ **0**

Date of Receipt
07 / 06 / 2011

Transaction ID : 3024303

Amount of Each Receipt this Period
75

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1379 OF 2452 |
| | <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 Wilcox
Full Name (Last, First, Middle Initial)

Mailing Address 1400 Geary Blvd Apt 7G
1400 Geary BLVD Apt 7G

City San Francisco State CA Zip Code 94109

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 ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 06 / 2011

Transaction ID : 3024309

Amount of Each Receipt this Period
35

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Mrs. Reva Schlesinger
Full Name (Last, First, Middle Initial)

Mailing Address 45 India Street

City Nantucket State MA Zip Code 02554

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 ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 06 / 2011

Transaction ID : 3024315

Amount of Each Receipt this Period
25

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 5820 N Pontatoc Road

City Tucson State AZ Zip Code 85718

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 ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 06 / 2011

Transaction ID : 3024327

Amount of Each Receipt this Period
75

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1380 OF 2452 |
| | <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

A. Ms. Marilyn S. Minto
 Full Name (Last, First, Middle Initial)
 Mailing Address 154 Beach Park Blvd.
 City State Zip Code
 Foster City CA 94404
 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 ▼
 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024364
 Amount of Each Receipt this Period
 30
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

B. Ms. Carolyn Ann A Legg
 Full Name (Last, First, Middle Initial)
 Mailing Address 853 Washington St.
 City State Zip Code
 Woodstock IL 60098
 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 ▼
 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024402
 Amount of Each Receipt this Period
 50
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

C. Beltzer Murray
 Full Name (Last, First, Middle Initial)
 Mailing Address 21230 23rd Ave
 City State Zip Code
 Bayside NY 11360
 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 ▼
 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024458
 Amount of Each Receipt this Period
 10
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1381 OF 2452 |
| | <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. Mary Cogan
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 694
 City Chatham State MA Zip Code 02633
 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 **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024576
 Amount of Each Receipt this Period
 500
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

B. Ms. Gloria J. Fulcher
 Full Name (Last, First, Middle Initial)
 Mailing Address 2925 Roanoke Ct
 City Bakersfield State CA Zip Code 93306
 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 **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024615
 Amount of Each Receipt this Period
 25
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

C. Ms. Jeraldine Trabant
 Full Name (Last, First, Middle Initial)
 Mailing Address 726 Loveville Road Cottage 94
 City Hockessin State DE Zip Code 19707
 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 **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024623
 Amount of Each Receipt this Period
 100
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1382 OF 2452 |
| | <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 M. Lawton
Full Name (Last, First, Middle Initial)
Mailing Address 207 River Chase Drive
City Orlando State FL Zip Code 32807
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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024627
Amount of Each Receipt this Period **100**
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

B. Ms. Karen R Melton
Full Name (Last, First, Middle Initial)
Mailing Address 11361 W Riverview Drive
City Post Falls State ID Zip Code 83854
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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024631
Amount of Each Receipt this Period **50**
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

C. Ms. Dolores Chase
Full Name (Last, First, Middle Initial)
Mailing Address 1235 E. 200 So. #402 #402
City SLC State UT Zip Code 84102
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 **0**

Date of Receipt **07 / 10 / 2011**
Transaction ID : 3025528
Amount of Each Receipt this Period **25**
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1383 OF 2452 |
| | <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. Ruth Gottlieb
 Full Name (Last, First, Middle Initial)
 Mailing Address 3300 Dary Rd
 Apt 5213
 City Haverford State PA Zip Code 19041
 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 **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025533
 Amount of Each Receipt this Period **25**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

B. Ms. Jeanette Finkbiner Leeds
 Full Name (Last, First, Middle Initial)
 Mailing Address 450 Elm Ave
 City Haddonfield State NJ Zip Code 08033
 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 **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025538
 Amount of Each Receipt this Period **25**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

C. Mrs. Judith Rystar
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 Edendale Lane
 City Durham State NH Zip Code 03824
 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 **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025629
 Amount of Each Receipt this Period **50**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1384 OF 2452 |
| | <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 Noonberg
Full Name (Last, First, Middle Initial)
Mailing Address 10 Beach Drive NE # 1901

| | | |
|------------------------|-------------|-------------------|
| City St. Petersburg | State FL | Zip Code 33701 |
|------------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 08 | | 2011 |

Transaction ID : 3025630

Amount of Each Receipt this Period

| |
|-----|
| 100 |
|-----|

 Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Mrs. Emmy Lu Hartley
Full Name (Last, First, Middle Initial)
Mailing Address 1400 Waverly Road, # B324

| | | |
|------------------|-------------|-------------------|
| City Gladwyne | State PA | Zip Code 19035 |
|------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 08 | | 2011 |

Transaction ID : 3025633

Amount of Each Receipt this Period

| |
|-----|
| 200 |
|-----|

 Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Ms. Mary Jack Wintle
Full Name (Last, First, Middle Initial)
Mailing Address 46 Timber Park Dr

| | | |
|-------------------|-------------|-------------------|
| City Black Mtn | State NC | Zip Code 28711 |
|-------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 08 | | 2011 |

Transaction ID : 3025639

Amount of Each Receipt this Period

| |
|-----|
| 100 |
|-----|

 Maria Cantwell Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1385 OF 2452 |
| | <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

A. Ms. Barbara K. Andreas
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 436
 City State Zip Code
 Laurelville OH 43135
 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 ▼
 0

Date of Receipt
 07 / 08 / 2011
Transaction ID : 3025647
 Amount of Each Receipt this Period
 50
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

B. Ms. Grace Leight
 Full Name (Last, First, Middle Initial)
 Mailing Address 205 W. End Avenue, Apt. 6K
 City State Zip Code
 New York NY 10023
 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 ▼
 0

Date of Receipt
 07 / 08 / 2011
Transaction ID : 3025654
 Amount of Each Receipt this Period
 250
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

C. Mr. Herman Kurfirst
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 Galer St Apt 54
 City State Zip Code
 Seattle WA 98109
 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 ▼
 0

Date of Receipt
 07 / 08 / 2011
Transaction ID : 3025663
 Amount of Each Receipt this Period
 100
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

| | |
|---|------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1386 OF 2452 |
| | <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. Gwen J Gillis
Full Name (Last, First, Middle Initial)
Mailing Address 4722 Amberwood Court

| | | |
|------------------|-------------|-------------------|
| City Carlsbad | State CA | Zip Code 92008 |
|------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 11 | / | 2011 |

Transaction ID : 3026149

Amount of Each Receipt this Period

| | |
|------------|----|
| 0000000000 | 25 |
|------------|----|

 Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Ms. Gertrude Reed
Full Name (Last, First, Middle Initial)
Mailing Address 417 Crosslands Dr.

| | | |
|------------------------|-------------|-------------------|
| City Kennett Square | State PA | Zip Code 19348 |
|------------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 11 | / | 2011 |

Transaction ID : 3026174

Amount of Each Receipt this Period

| | |
|------------|----|
| 0000000000 | 50 |
|------------|----|

 Maria Cantwell Contributions

[MEMO ITEM]
MEMO

c. Marilyn Gordon
Full Name (Last, First, Middle Initial)
Mailing Address 116 Walnut Grove Rd.

| | | |
|--------------------|-------------|-------------------|
| City Ridgefield | State CT | Zip Code 06877 |
|--------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 11 | / | 2011 |

Transaction ID : 3026195

Amount of Each Receipt this Period

| | |
|------------|----|
| 0000000000 | 10 |
|------------|----|

 Maria Cantwell Contributions

[MEMO ITEM]
MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1387 OF 2452 |
| | <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. Elyse Fleming
Full Name (Last, First, Middle Initial)
Mailing Address 39905 Via Scena Unit 246

| | | |
|---------------------|-------------|-------------------|
| City Palm Desert | State CA | Zip Code 92260 |
|---------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 11 | / | 2011 |

Transaction ID : 3026205

Amount of Each Receipt this Period

| |
|----|
| 50 |
|----|

 Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Ms. Shirley J. Parish
Full Name (Last, First, Middle Initial)
Mailing Address 1643 North Leeds Avenue

| | | |
|-----------------|-------------|-------------------|
| City Ontario | State CA | Zip Code 91764 |
|-----------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 11 | / | 2011 |

Transaction ID : 3026212

Amount of Each Receipt this Period

| |
|----|
| 50 |
|----|

 Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Miss Iris A A. Gruwell
Full Name (Last, First, Middle Initial)
Mailing Address 290 Stoneykirk Dr

| | | |
|---------------------|-------------|-------------------|
| City Bella Vista | State AR | Zip Code 72715 |
|---------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | / | 11 | / | 2011 |

Transaction ID : 3026216

Amount of Each Receipt this Period

| |
|----|
| 20 |
|----|

 Maria Cantwell Contributions

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1388 OF 2452 |
| | <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. Merryl J. Weber
Full Name (Last, First, Middle Initial)

Mailing Address 5808 Varna Ave

City Van Nuys State CA Zip Code 91401

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : 3026227

Amount of Each Receipt this Period
50

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Ms. Iris L. McPherson
Full Name (Last, First, Middle Initial)

Mailing Address 6223 Mesa Circle

City Stillwater State OK Zip Code 74074

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : 3026240

Amount of Each Receipt this Period
50

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Ms. Genevieve S James
Full Name (Last, First, Middle Initial)

Mailing Address 12 N Meadowcroft Ave #A

City Pittsburg State PA Zip Code 15216

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2011

Transaction ID : 3026774

Amount of Each Receipt this Period
25

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1389 OF 2452 |
| | <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. Angelica S. Harter
Full Name (Last, First, Middle Initial)
Mailing Address 16 Arlington Street
City Cambridge State MA Zip Code 02140
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 ▼ 0

Date of Receipt 07 / 12 / 2011
Transaction ID : 3026786
Amount of Each Receipt this Period 250
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

B. Ms. Patricia Ann Smith
Full Name (Last, First, Middle Initial)
Mailing Address 234 Crescent Drive
City Orinda State CA Zip Code 94563
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 ▼ 0

Date of Receipt 07 / 12 / 2011
Transaction ID : 3026789
Amount of Each Receipt this Period 50
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

C. Ms. Mary E. Dimperio
Full Name (Last, First, Middle Initial)
Mailing Address 4000 Cathedral Avenue NW Apt. 106B
City Washington State DC Zip Code 20016
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 ▼ 0

Date of Receipt 07 / 12 / 2011
Transaction ID : 3026791
Amount of Each Receipt this Period 100
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1391 OF 2452 |
| | <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. Marion M. Morgan
 Full Name (Last, First, Middle Initial)
 Mailing Address 930 28th St
 Apt 256
 City Boulder State CO Zip Code 80303
 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 **0**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2011
Transaction ID : 3027419
 Amount of Each Receipt this Period
 100
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

B. Ms. Mary Alice Spencer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 Senora Avenue
 City Billings State MT Zip Code 59105
 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 **0**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2011
Transaction ID : 3027423
 Amount of Each Receipt this Period
 100
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

C. Ms. Jane Walsh
 Full Name (Last, First, Middle Initial)
 Mailing Address 2545 Dorset Rd
 City Columbus State OH Zip Code 43221
 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 **0**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2011
Transaction ID : 3027424
 Amount of Each Receipt this Period
 100
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

| | |
|---|------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1392 OF 2452 |
| | <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

A. Ms. Pamela K. Lopes
 Full Name (Last, First, Middle Initial)
 Mailing Address 1421 N Camino de Juan
 City Tucson State AZ Zip Code 85745
 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 **0**

Date of Receipt **07 / 14 / 2011**
Transaction ID : 3027653
 Amount of Each Receipt this Period **50**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

B. Ms. Vivian E. Uttermann
 Full Name (Last, First, Middle Initial)
 Mailing Address 11113 Jollyway
 City Kensington State MD Zip Code 20895
 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 **0**

Date of Receipt **07 / 14 / 2011**
Transaction ID : 3027662
 Amount of Each Receipt this Period **12.5**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

C. Ms. Kay Cooper
 Full Name (Last, First, Middle Initial)
 Mailing Address 6501 Meadow View Road
 City Hillsborough State NC Zip Code 27278
 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 **0**

Date of Receipt **07 / 15 / 2011**
Transaction ID : 3028192
 Amount of Each Receipt this Period **50**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1393 OF 2452 |
| | <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. Elaine K. Cowles | | Date of Receipt MM / DD / YYYY 07 / 18 / 2011 |
| Mailing Address 540 Amphill Rd | | Transaction ID : 3029504 |
| City Cartersville | State VA | Zip Code 23027 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25 | |
| Name of Employer N/A | Occupation Retired | Maria Cantwell Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Mrs. Emiy B. Rutherford | | Date of Receipt MM / DD / YYYY 07 / 19 / 2011 |
| Mailing Address 2862 Raccoon Valley | | Transaction ID : 3029821 |
| City Granville | State OH | Zip Code 43023 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 111.11 | |
| Name of Employer N/A | Occupation Retired | Maria Cantwell Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Ms. Jo B. Byler | | Date of Receipt MM / DD / YYYY 07 / 19 / 2011 |
| Mailing Address 1523 E Woodland Dr | | Transaction ID : 3029891 |
| City Dalton Gardens | State ID | Zip Code 83815 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 7.5 | |
| Name of Employer N/A | Occupation Retired | Maria Cantwell Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1394 OF 2452 |
| | <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. Beverly Lipman
Full Name (Last, First, Middle Initial)

Mailing Address 188

City Portola Valley State CA Zip Code 94028

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2011

Transaction ID : 3029902

Amount of Each Receipt this Period
 50

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Ms. Judith P. Borden
Full Name (Last, First, Middle Initial)

Mailing Address 16749 Addison Street

City Encino State CA Zip Code 91436

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2011

Transaction ID : 3030297

Amount of Each Receipt this Period
 100

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Mr. Edward R. Robertson
Full Name (Last, First, Middle Initial)

Mailing Address 2 Greens Way

City Denver State PA Zip Code 17517

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2011

Transaction ID : 3030313

Amount of Each Receipt this Period
 25

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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

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

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|---|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 1395 OF 2452 |
| | (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

A. Ms. Joanne B. Frank
Full Name (Last, First, Middle Initial)
Mailing Address 1216 Yarmouth Rd
City Wynnewood State PA Zip Code 19096
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 ▼ 0

Date of Receipt 07 / 20 / 2011
Transaction ID : 3030582
Amount of Each Receipt this Period 100
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

B. Mr. Floyd H. Nordland
Full Name (Last, First, Middle Initial)
Mailing Address 16313 Somerset Dr
City Broomfield State CO Zip Code 80023
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 ▼ 0

Date of Receipt 07 / 21 / 2011
Transaction ID : 3031999
Amount of Each Receipt this Period 50
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

C. Ms. Leah Horwitz
Full Name (Last, First, Middle Initial)
Mailing Address 305 Savage Farm Drive
City Ithaca State NY Zip Code 14850
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 ▼ 0

Date of Receipt 07 / 21 / 2011
Transaction ID : 3032031
Amount of Each Receipt this Period 200
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1396 OF 2452 |
| | (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

A. Mrs. Patricia Colburn
Full Name (Last, First, Middle Initial)
Mailing Address 1559 Oakdale St.
City Pasadena State CA Zip Code 91106
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 ▼ **0**

Date of Receipt **07 / 21 / 2011**
Transaction ID : 3032056
Amount of Each Receipt this Period **100**
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

B. Col. Billie M. Bobbitt
Full Name (Last, First, Middle Initial)
Mailing Address 5830 North Fountains Avenue Apartment # 226
City Tucson State AZ Zip Code 85704
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 ▼ **0**

Date of Receipt **07 / 26 / 2011**
Transaction ID : 3032964
Amount of Each Receipt this Period **500**
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

C. 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 N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 27 / 2011**
Transaction ID : 3035057
Amount of Each Receipt this Period **200**
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1397 OF 2452 |
| <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. Mrs. Sydney B. Spofford
 Full Name (Last, First, Middle Initial)
 Mailing Address 1954 Michigan Avenue
 City Marysville State MI Zip Code 48040
 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 ▼ 0

Date of Receipt 07 / 27 / 2011
Transaction ID : 3035090
 Amount of Each Receipt this Period 100
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

B. Dr. Mary Gergen
 Full Name (Last, First, Middle Initial)
 Mailing Address 331 Rogers Lane
 City Wallingford State PA Zip Code 19086
 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 ▼ 0

Date of Receipt 07 / 26 / 2011
Transaction ID : 3035098
 Amount of Each Receipt this Period 50
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

C. Ms. Patricia C. Ashbrook
 Full Name (Last, First, Middle Initial)
 Mailing Address 1330 Massachusetts Av NW Apt. 622
 City Washington State DC Zip Code 20005
 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 ▼ 0

Date of Receipt 07 / 27 / 2011
Transaction ID : 3035105
 Amount of Each Receipt this Period 25
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1398 OF 2452 |
| | <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. Elaine A. Bridges | | Date of Receipt MM / DD / YYYY 07 / 28 / 2011 |
| Mailing Address P.O. Box 3605 | | Transaction ID : 3035462 |
| City San Angelo | State TX | Zip Code 76902 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 1000 | |
| Name of Employer N/A | Occupation Retired | Maria Cantwell Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Leann McElroy | | Date of Receipt MM / DD / YYYY 07 / 28 / 2011 |
| Mailing Address 2280 Dant Blvd | | Transaction ID : 3035646 |
| City Reno | State NV | Zip Code 89509 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 25 | |
| Name of Employer N/A | Occupation retired | Maria Cantwell Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Ms. Nancy G. Feldman | | Date of Receipt MM / DD / YYYY 07 / 28 / 2011 |
| Mailing Address 3431 E 67 Street | | Transaction ID : 3035662 |
| City tulsa | State OK | Zip Code 74136 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 200 | |
| Name of Employer N/A | Occupation Retired | Maria Cantwell Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1399 OF 2452 |
| | <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. Ella M Forsyth

Mailing Address 219 Graham st

City Carlisle State PA Zip Code 17013

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2011

Transaction ID : 3035668

Amount of Each Receipt this Period
100

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

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

Mailing Address 1000 SW Vista Avenue # 919

City Portland State OR Zip Code 97205

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2011

Transaction ID : 3035675

Amount of Each Receipt this Period
50

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Ms. Sue Kilrain

Mailing Address 1800 Purdy Ave, #1002 Apt.1002

City Miami Beach State FL Zip Code 33139

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2011

Transaction ID : 3035806

Amount of Each Receipt this Period
100

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1400 OF 2452 |
| <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. Louise O. Cleveland
 Full Name (Last, First, Middle Initial)
 Mailing Address 902 Neal Drive
 City Alexandria State VA Zip Code 22308
 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 ▼ **0**

Date of Receipt **07 / 29 / 2011**
Transaction ID : 3035905
 Amount of Each Receipt this Period **200**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

B. Mrs. Kathleen J. Bavelas
 Full Name (Last, First, Middle Initial)
 Mailing Address 56 Pratt Lane
 City Wolcott State CT Zip Code 06716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gateway C C Occupation retired but part-tim
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026121
 Amount of Each Receipt this Period **30**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

C. Mr. Chris Stromsness
 Full Name (Last, First, Middle Initial)
 Mailing Address 4220 Patricia Way
 City Dunsmuir State CA Zip Code 96025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation retired judge
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 22 / 2011**
Transaction ID : 3032331
 Amount of Each Receipt this Period **100**
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1401 OF 2452 |
| | <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. Shirley Lindquist | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 Transaction ID : 3024233 |
| Mailing Address 6555 Parkpoint Way NE | | Amount of Each Receipt this Period 010 Maria Cantwell Contributions |
| City Seattle | State WA | Zip Code 98115 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer Retired | Occupation retired teacher | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Ms. Kaye Paauw | | Date of Receipt MM / DD / YYYY 07 / 11 / 2011 Transaction ID : 3026171 |
| Mailing Address 16622 NE 19th Place | | Amount of Each Receipt this Period 50 Maria Cantwell Contributions |
| City Bellevue | State WA | Zip Code 98008 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer Cranbrook Educational Community Bloomf | Occupation retired teacher | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Mr. Randall Shields | | Date of Receipt MM / DD / YYYY 07 / 12 / 2011 Transaction ID : 3026805 |
| Mailing Address 1423 w. maple st. | | Amount of Each Receipt this Period 100 Maria Cantwell Contributions |
| City Kalamazoo | State MI | Zip Code 49008 |
| FEC ID number of contributing federal political committee. C | | [MEMO ITEM] MEMO |
| Name of Employer self-employed | Occupation sales | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1402 OF 2452 |
| | <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. Jeanne Elkins
Full Name (Last, First, Middle Initial)

Mailing Address 1537 Westminster Dr
Apt. 112

City Naperville State IL Zip Code 60563

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

Name of Employer Argonne National Lab Occupation Scientist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
07 / 20 / 2011

Transaction ID : 3030594

Amount of Each Receipt this Period
25

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

B. Ms. Jean A. Wolff
Full Name (Last, First, Middle Initial)

Mailing Address 10543 Garwood Pl

City Los Angeles State CA Zip Code 90024

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

Name of Employer Self Occupation Sculptor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
07 / 18 / 2011

Transaction ID : 3029416

Amount of Each Receipt this Period
200

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

C. Ms. Paula Susemichel
Full Name (Last, First, Middle Initial)

Mailing Address 5703 Broadway Street

City Indianapolis State IN Zip Code 46220

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

Name of Employer DPS, Inc. Occupation Senior Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
07 / 20 / 2011

Transaction ID : 3031035

Amount of Each Receipt this Period
200

Maria Cantwell Contributions

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1403 OF 2452 |
| | <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. Mr. Ian E. Stockdale
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 Forest Avenue
 City Palo Alto State CA Zip Code 94301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Inktomi Corporation Occupation Software Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 05 / 2011
Transaction ID : 3023033
 Amount of Each Receipt this Period 200
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

B. Mr. Jim Perry
 Full Name (Last, First, Middle Initial)
 Mailing Address 2406 Tatnuck Ct
 City Herndon State VA Zip Code 20171
 FEC ID number of contributing federal political committee. **C**
 Name of Employer International Display Systems Occupation Sys Admin
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 04 / 2011
Transaction ID : 3021926
 Amount of Each Receipt this Period 80
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

C. Ms. Florence Brodley
 Full Name (Last, First, Middle Initial)
 Mailing Address 351C Heritage Hills
 City Somers State NY Zip Code 10589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYC Board of Educ. Occupation Teacher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 14 / 2011
Transaction ID : 3027420
 Amount of Each Receipt this Period 25
 Maria Cantwell Contributions
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1404 OF 2452 |
| | <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. Liana Crabtree
Full Name (Last, First, Middle Initial)
Mailing Address 20378 Clay Street
City State Zip Code
Cupertino CA 95014
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Siemens Technical Writer
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt
07 / 28 / 2011
Transaction ID : 3035685
Amount of Each Receipt this Period
50
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

B. Ms. Sharon Lee M.S.
Full Name (Last, First, Middle Initial)
Mailing Address 905B NE 68th St Ste B2
City State Zip Code
Vancouver WA 98665
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self Therapist
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt
07 / 26 / 2011
Transaction ID : 3035106
Amount of Each Receipt this Period
25
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

C. ann kirkpatrick
Full Name (Last, First, Middle Initial)
Mailing Address 432 W Cattle Drive Trail
City State Zip Code
Flagstaff AZ 86001
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
None unemployed
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ **0**

Date of Receipt
07 / 09 / 2011
Transaction ID : 3025453
Amount of Each Receipt this Period
30
Maria Cantwell Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1405 OF 2452 |
| | <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. Amy Thomson | | Date of Receipt MM / DD / YYYY 07 / 12 / 2011 |
| Mailing Address 1505 SW Alaska St. | | Transaction ID : 3027082 |
| City Seattle | State WA | Zip Code 98106 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50 | |
| Name of Employer Self employed | Occupation WRiter | Maria Cantwell Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Mr. Jonathan B. Parker | | Date of Receipt MM / DD / YYYY 07 / 29 / 2011 |
| Mailing Address 1611 Hobart St NW | | Transaction ID : 3035822 |
| City Washington | State DC | Zip Code 20009 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100 | |
| Name of Employer EMILY's List | Occupation political | Mazie Hirono Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Ms. Pamela L Lowry | | Date of Receipt MM / DD / YYYY 07 / 27 / 2011 |
| Mailing Address 27 Oak Road | | Transaction ID : 3035332 |
| City Santa Cruz | State CA | Zip Code 95060 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100 | |
| Name of Employer N/A | Occupation Retired | Mazie Hirono Contributions |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1406 OF 2452 |
| | <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. Hedy M Ratner
Full Name (Last, First, Middle Initial)

Mailing Address 1960 Lincoln Park West
#2301

City Chicago State IL Zip Code 60614

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

Name of Employer Women's Business Development Center Occupation Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 05 / 2011**

Transaction ID : 3023020

Amount of Each Receipt this Period **50**

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

B. Ms. Linda L. Martin
Full Name (Last, First, Middle Initial)

Mailing Address 5475 Wingborne Ct

City Columbia State MD Zip Code 21045

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

Name of Employer SSA Occupation Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 06 / 2011**

Transaction ID : 3024635

Amount of Each Receipt this Period **50**

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

C. Mrs. Bette S. Paris
Full Name (Last, First, Middle Initial)

Mailing Address 607 N. Arden Drive

City Beverly Hills State CA Zip Code 90210

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

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 05 / 2011**

Transaction ID : 3023100

Amount of Each Receipt this Period **50**

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1407 OF 2452 |
| | <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. E. Marianne Gabel
Full Name (Last, First, Middle Initial)
Mailing Address 49 forest ave.
City Delaware State OH Zip Code 43015
FEC ID number of contributing federal political committee. **C**
Name of Employer self employed Occupation Attorney
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 0

Date of Receipt 07 / 08 / 2011
Transaction ID : 3025431
Amount of Each Receipt this Period 500
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

B. Ms. Sue C Hansen
Full Name (Last, First, Middle Initial)
Mailing Address 6927 Fairmount Ave.
City El Cerrito State CA Zip Code 94530
FEC ID number of contributing federal political committee. **C**
Name of Employer State Occupation Attorney
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 0

Date of Receipt 07 / 10 / 2011
Transaction ID : 3025511
Amount of Each Receipt this Period 100
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

C. John Auyong
Full Name (Last, First, Middle Initial)
Mailing Address 835 1/2 South Sycamore Avenue
City Los Angeles State CA Zip Code 90036
FEC ID number of contributing federal political committee. **C**
Name of Employer Social Security Administration Occupation Attorney Advisor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 0

Date of Receipt 07 / 03 / 2011
Transaction ID : 3021666
Amount of Each Receipt this Period 10
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1408 OF 2452 |
| | <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. Steven F. Hinshaw
Full Name (Last, First, Middle Initial)

Mailing Address 2800 S. Andrews Rd. #38

City Yorktown State IN Zip Code 47396

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

Name of Employer Retired Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 06 / 2011**

Transaction ID : 3024661

Amount of Each Receipt this Period **20**

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

B. Mr. Kicab Castaneda-Mendez
Full Name (Last, First, Middle Initial)

Mailing Address 112 Rhododendron CT

City Chapel Hill State NC Zip Code 27517

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

Name of Employer self Occupation consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 02 / 2011**

Transaction ID : 3021792

Amount of Each Receipt this Period **25**

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

C. Ms. Cynthia Linton
Full Name (Last, First, Middle Initial)

Mailing Address 990 N. Lake Shore Dr., 15E

City Chicago State IL Zip Code 60611

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

Name of Employer Self-Employed Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt **07 / 11 / 2011**

Transaction ID : 3026199

Amount of Each Receipt this Period **100**

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1409 OF 2452 |
| | <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. Joan Dolan Biblo | | Date of Receipt MM / DD / YYYY 07 / 12 / 2011 |
| Mailing Address 8707 Riggs Lane # 4 | | Transaction ID : 3026782 |
| City Overland Park | State KS | Zip Code 66212 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 50 | |
| Name of Employer Self | Occupation Consultant | Shelley Berkley Senate Cntbs |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Ms. Virginia S. Kimball | | Date of Receipt MM / DD / YYYY 07 / 18 / 2011 |
| Mailing Address 1685 La Vista Place | | Transaction ID : 3029426 |
| City Pasadena | State CA | Zip Code 91103 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 100 | |
| Name of Employer Self | Occupation Consultant | Shelley Berkley Senate Cntbs |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Ms. Amy Sherman Palladino | | Date of Receipt MM / DD / YYYY 07 / 21 / 2011 |
| Mailing Address 15260 Ventura #1040 | | Transaction ID : 3031659 |
| City Sherman Oaks | State CA | Zip Code 91403 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 1000 | |
| Name of Employer Warner Bros (Gilmore Girls) | Occupation Creator/Director/Producer | Shelley Berkley Senate Cntbs |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1411 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Dr. Lisa M. Schwerdt
 Full Name (Last, First, Middle Initial)
 Mailing Address 5337 California Ave
 City Bethel Park State PA Zip Code 15102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer California Univ. of Penn. Occupation English Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 22 / 2011
Transaction ID : 3032350
 Amount of Each Receipt this Period 10
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Ms. Debra Fried Levin
 Full Name (Last, First, Middle Initial)
 Mailing Address 6304 31 Place, NW
 City Washington State DC Zip Code 20015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation fund-raiser
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 18 / 2011
Transaction ID : 3029429
 Amount of Each Receipt this Period 100
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Ms. Janice E. Savidge
 Full Name (Last, First, Middle Initial)
 Mailing Address 4955 Makena Rd Apt D301
 City Kihei State HI Zip Code 96753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 06 / 2011
Transaction ID : 3024294
 Amount of Each Receipt this Period 200
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1412 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Mrs. Jo Denton Tuck
 Full Name (Last, First, Middle Initial)
 Mailing Address 4242 Lomo Alto Drive, Apt S28
 City Dallas State TX Zip Code 75219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024625
 Amount of Each Receipt this Period
 100
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Mrs. Martha H. Talbot
 Full Name (Last, First, Middle Initial)
 Mailing Address 6656 Chilton Court
 City McLean State VA Zip Code 22101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2011
Transaction ID : 3025213
 Amount of Each Receipt this Period
 1000
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Ms. Jenny Bateman Mudge
 Full Name (Last, First, Middle Initial)
 Mailing Address 2614 Ellentown Road
 City La Jolla State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2011
Transaction ID : 3032485
 Amount of Each Receipt this Period
 500
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1413 OF 2452 |
| | <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. Ellen Brown | | Date of Receipt MM / DD / YYYY 07 / 28 / 2011 |
| Mailing Address 3549 Julie Court | | Transaction ID : 3035676 |
| City Palo Alto | State CA | Zip Code 94306 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 100 |
| Name of Employer n/a | Occupation Hospice Physician | Shelley Berkley Senate Cntbs |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Nan Guslander | | Date of Receipt MM / DD / YYYY 07 / 18 / 2011 |
| Mailing Address 5501A Balcones Drive | | Transaction ID : 3029477 |
| City Austin | State TX | Zip Code 78731 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 100 |
| Name of Employer Self | Occupation investor | Shelley Berkley Senate Cntbs |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Alice Wick Hall | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 |
| Mailing Address 273 Upland Road | | Transaction ID : 3024598 |
| City Cambridge | State MA | Zip Code 02140 |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 250 |
| Name of Employer Wekesley College | Occupation Librarian | Shelley Berkley Senate Cntbs |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1414 OF 2452 |
| | <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. Mrs. Melissa E. Trevvett
 Full Name (Last, First, Middle Initial)
 Mailing Address 1225 E. 54th St.
 City Chicago State IL Zip Code 60615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Boston Library Consortium Occupation Librarian
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 16 / 2011**
Transaction ID : 3027746
 Amount of Each Receipt this Period **50**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Ms. Bonnie W. Eisenfeld
 Full Name (Last, First, Middle Initial)
 Mailing Address 2031 Locust Street, Apt. 402
 City Philadelphia State PA Zip Code 19103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Market Research Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024641
 Amount of Each Receipt this Period **100**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Ms. Tiffany N Reed
 Full Name (Last, First, Middle Initial)
 Mailing Address 2480 16th Street NW #446
 City Washington State DC Zip Code 20009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Democratic National Committee Occupation Marketing Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 07 / 2011**
Transaction ID : 3025216
 Amount of Each Receipt this Period **25**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1415 OF 2452 |
| | <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. Jeanne Y. Turgeon
 Full Name (Last, First, Middle Initial)
 Mailing Address 4139 19th Avenue SW
 City Seattle State WA Zip Code 98106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Univ. of Washington Occupation Medical Technologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023049
 Amount of Each Receipt this Period **10**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Mr. Newton Press
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 Furbush Avenue
 City Newton State MA Zip Code 02465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Press, Bateman and Turner Occupation MS BROKY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026231
 Amount of Each Receipt this Period **100**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Ms. Clare Vincent
 Full Name (Last, First, Middle Initial)
 Mailing Address 326 East 85th Street, Apt G
 City New York State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Metro. Museum Of Art Occupation Museum Curator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 22 / 2011**
Transaction ID : 3031642
 Amount of Each Receipt this Period **50**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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

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

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| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 1416 OF 2452 (check only one) |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
EMILY's List

A. Ms. Joan Creigh Little
Full Name (Last, First, Middle Initial)

Mailing Address 11986 Alpine Terrace

| | | |
|-------------------|-------------|-------------------|
| City San Diego | State CA | Zip Code 92128 |
|-------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 01 / 2011

Transaction ID : 3021783

Amount of Each Receipt this Period
10

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

B. Ms. Janet P Wolf
Full Name (Last, First, Middle Initial)

Mailing Address 2465 SW Timberline Dr

| | | |
|------------------|-------------|-------------------|
| City Portland | State OR | Zip Code 97225 |
|------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 10 / 2011

Transaction ID : 3025498

Amount of Each Receipt this Period
50

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

C. Ms. Judith Krantz
Full Name (Last, First, Middle Initial)

Mailing Address 166 Groverton Pl

| | | |
|---------------------|-------------|-------------------|
| City Los Angeles | State CA | Zip Code 90077 |
|---------------------|-------------|-------------------|

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

| | |
|--------------------------|------------------------|
| Name of Employer Self | Occupation Novelist |
|--------------------------|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2011

Transaction ID : 3035889

Amount of Each Receipt this Period
2500

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

| | |
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| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1417 OF 2452 |
| | <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 Silver
 Full Name (Last, First, Middle Initial)
 Mailing Address 1059 W Skylark Drive
 City Palatine State IL Zip Code 60067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Drs. Bedingfield and Rosen Occupation Pediatrician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 15 / 2011**
Transaction ID : 3029042
 Amount of Each Receipt this Period **50**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Ms. Mildred Weissman
 Full Name (Last, First, Middle Initial)
 Mailing Address 81 Manursing Way
 City Rye State NY Zip Code 10580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Philanthopist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024288
 Amount of Each Receipt this Period **1000**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Ms. Kathleen Baldwin
 Full Name (Last, First, Middle Initial)
 Mailing Address 418 15th St
 City Wilmette State IL Zip Code 60091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023115
 Amount of Each Receipt this Period **75**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1418 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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| <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. 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 GA Health Sciencea Univ Occupation Physician/educator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 21 / 2011**
Transaction ID : 3032008
 Amount of Each Receipt this Period **200**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Ms. Carolyn W. Sanger
 Full Name (Last, First, Middle Initial)
 Mailing Address 4331 N. Camino de Carrillo
 City Tucson State AZ Zip Code 85750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Piles of Paper? self-employed Occupation Professional Organiz
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022074
 Amount of Each Receipt this Period **50**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Ms. Donna Bahry Bartlett
 Full Name (Last, First, Middle Initial)
 Mailing Address 628 Fairway Road
 City State College State PA Zip Code 16803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Penn State University Occupation Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 26 / 2011**
Transaction ID : 3035100
 Amount of Each Receipt this Period **100**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| 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 1419 OF 2452 |
| | <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. Marion Taylor Taylor Baer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3636 Corinth Ave
 City Los Angeles State CA Zip Code 90066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer USC Occupation Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 28 / 2011**
Transaction ID : 3035688
 Amount of Each Receipt this Period **25**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Ms. Sarah Evan
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 Martins Run Apt B103
 City Media State PA Zip Code 19063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025558
 Amount of Each Receipt this Period **25**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Dr. Wendy Santin Rapaport
 Full Name (Last, First, Middle Initial)
 Mailing Address 19372cedar glen dr
 City Boca Raton State FL Zip Code 33434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026163
 Amount of Each Receipt this Period **10**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
TOTAL This Period (last page this line number only).....

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

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|---|---|-------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 1420 OF 2452 |
| | <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. Dr. Lloyd Meadow
 Full Name (Last, First, Middle Initial)
 Mailing Address 355 Oak Park Drive
 City San Francisco State CA Zip Code 94131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self employed Occupation psychologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 12 / 2011**
Transaction ID : 3027123
 Amount of Each Receipt this Period **50**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Ms. Martha Schoenemann
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 216
 City Pawlet State VT Zip Code 5761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bob Schoenemann RE Service Occupation Real Estate
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 26 / 2011**
Transaction ID : 3035096
 Amount of Each Receipt this Period **50**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Ms. Pat C. Bevis
 Full Name (Last, First, Middle Initial)
 Mailing Address 3519 Peppermint Court
 City Tucker State GA Zip Code 30084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nelson-Rives Realty, Inc. Occupation Realtor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **0**

Date of Receipt **07 / 08 / 2011**
Transaction ID : 3025651
 Amount of Each Receipt this Period **50**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1421 OF 2452 |
| | <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. Susanne M. Yokel
 Full Name (Last, First, Middle Initial)
 Mailing Address 8208 Fenway Road
 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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3021819
 Amount of Each Receipt this Period **25**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Ms. Margret Jacoby
 Full Name (Last, First, Middle Initial)
 Mailing Address 912 Blossom Drive
 City Santa Clara State CA Zip Code 95050
 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 **0**

Date of Receipt **07 / 01 / 2011**
Transaction ID : 3022077
 Amount of Each Receipt this Period **100**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Ms. Elaine F. Marshack
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Washingt n Square Vlg Apt. 13A
 City New York State NY Zip Code 10012
 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 **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023064
 Amount of Each Receipt this Period **50**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1422 OF 2452 |
| | <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. Barbara Gorenstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 1919 Chestnut Street, # 917
 City Philadelphia State PA Zip Code 19103
 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 **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023065
 Amount of Each Receipt this Period **15**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Ms. Gloria Gallingane
 Full Name (Last, First, Middle Initial)
 Mailing Address 395 Riverside Drive Apt. 12AE
 City New York State NY Zip Code 10025
 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 **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023116
 Amount of Each Receipt this Period **25**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Ms. Carol Ashby
 Full Name (Last, First, Middle Initial)
 Mailing Address 10236 Sioux Rd
 City Richmond State VA Zip Code 23235
 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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024577
 Amount of Each Receipt this Period **25**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1423 OF 2452 |
| | <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. Sandy Gruver
 Full Name (Last, First, Middle Initial)
 Mailing Address 419 Hedgerow Court
 City State Zip Code
 Mountatin View CA 94041
 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 ▼
 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024637
 Amount of Each Receipt this Period
 25
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Ms. Cheryl Washington
 Full Name (Last, First, Middle Initial)
 Mailing Address 6258 Cottle Road
 City State Zip Code
 San Jose CA 95123
 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 ▼
 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024658
 Amount of Each Receipt this Period
 20
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Nancy Van Roekens
 Full Name (Last, First, Middle Initial)
 Mailing Address 5300 Ocean Blvd. #201
 City State Zip Code
 Sarasota FL 34242
 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 ▼
 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011
Transaction ID : 3024668
 Amount of Each Receipt this Period
 50
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1424 OF 2452 |
| | <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. Mr. Thomas Lovejoy
 Full Name (Last, First, Middle Initial)
 Mailing Address 8526 Georgetown Pike
 City McLean State VA Zip Code 22102
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2011
Transaction ID : 3025660
 Amount of Each Receipt this Period
 100
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Ms. Virginia Stallings Bell
 Full Name (Last, First, Middle Initial)
 Mailing Address 1303 Hillcrest Dr.
 City Blacksburg State VA Zip Code 24060
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2011
Transaction ID : 3025670
 Amount of Each Receipt this Period
 30
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Mr. Patrick McIntosh
 Full Name (Last, First, Middle Initial)
 Mailing Address 3885 Paseo Del Prado St
 City Boulder State CO Zip Code 80301
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2011
Transaction ID : 3025673
 Amount of Each Receipt this Period
 40
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1425 OF 2452 |
| | (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

A. Ms. Nancy Lincoln
Full Name (Last, First, Middle Initial)

Mailing Address 43 Hedge Rd

City Brookline State MA Zip Code 02445

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2011

Transaction ID : 3026158

Amount of Each Receipt this Period
 50

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

B. Ms. Amy Crofts
Full Name (Last, First, Middle Initial)

Mailing Address 605 E Court St

City Viroqua State WI Zip Code 54665

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2011

Transaction ID : 3026188

Amount of Each Receipt this Period
 10

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

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

Mailing Address 5 Boulder Brook Ct

City Belle Mead State NJ Zip Code 08502

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2011

Transaction ID : 3026222

Amount of Each Receipt this Period
 100

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1426 OF 2452 |
| <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. Lili Townsend
Full Name (Last, First, Middle Initial)
Mailing Address 3288 Waileia Place

| | | |
|----------------|-------------|-------------------|
| City Wailea | State HI | Zip Code 96753 |
|----------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : 3026234

Amount of Each Receipt this Period
100

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

B. Ms. Sally Goren
Full Name (Last, First, Middle Initial)
Mailing Address 215 Pin Oak Drive

| | | |
|------------------|-------------|-------------------|
| City Wilmette | State IL | Zip Code 60091 |
|------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : 3026252

Amount of Each Receipt this Period
25

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

C. Ms. Kay Blackburn
Full Name (Last, First, Middle Initial)
Mailing Address 78585 Vista Del Fuente

| | | |
|----------------------|-------------|-------------------|
| City Indian Wells | State CA | Zip Code 92210 |
|----------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2011

Transaction ID : 3026257

Amount of Each Receipt this Period
100

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1427 OF 2452 |
| | <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. Jeanne D. Feldman
 Full Name (Last, First, Middle Initial)
 Mailing Address 18655 W. Bernardo Drive # 468
 City San Diego State CA Zip Code 92127
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2011
Transaction ID : 3026769
 Amount of Each Receipt this Period
 50
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Ms. Dawn Shaw
 Full Name (Last, First, Middle Initial)
 Mailing Address 705 Tanglewood Lane
 City Kerrville State TX Zip Code 78028
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2011
Transaction ID : 3026800
 Amount of Each Receipt this Period
 25
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

c. Ms. Judith C. Gebera
 Full Name (Last, First, Middle Initial)
 Mailing Address 146 Grove St.
 City Tonawanda State NY Zip Code 14150
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 12 / 2011
Transaction ID : 3026808
 Amount of Each Receipt this Period
 25
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1428 OF 2452 |
| | <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. Pearl Spiro
Full Name (Last, First, Middle Initial)
Mailing Address 62 New York Avenue
City Congers State NY Zip Code 10920
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 **0**

Date of Receipt
MM / DD / YYYY
07 / 12 / 2011
Transaction ID : 3026811
Amount of Each Receipt this Period
50
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

B. Ms. Brenda Butka
Full Name (Last, First, Middle Initial)
Mailing Address 5188 Old Hickory Boulevard
City Nashville State TN Zip Code 37218
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 **0**

Date of Receipt
MM / DD / YYYY
07 / 15 / 2011
Transaction ID : 3029049
Amount of Each Receipt this Period
35
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

C. Ms. Frances Israel
Full Name (Last, First, Middle Initial)
Mailing Address 17739 Saint Andrews Drive
City Poway State CA Zip Code 92064
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 **0**

Date of Receipt
MM / DD / YYYY
07 / 15 / 2011
Transaction ID : 3029056
Amount of Each Receipt this Period
50
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1429 OF 2452 |
| | <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. Aase Loescher
Full Name (Last, First, Middle Initial)
Mailing Address 2661 E. Fair Oaks Lane
City Bloomington State IN Zip Code 47401
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 **0**

Date of Receipt **07 / 15 / 2011**
Transaction ID : 3029057
Amount of Each Receipt this Period **100**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

B. Ms. Deborah C Franczek
Full Name (Last, First, Middle Initial)
Mailing Address 5555 S Everett Ave, Apt D
City Chicago State IL Zip Code 60637
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 **0**

Date of Receipt **07 / 15 / 2011**
Transaction ID : 3029266
Amount of Each Receipt this Period **250**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

C. Ms. Karla Ingram
Full Name (Last, First, Middle Initial)
Mailing Address 4616 Molsonwood Dr
City Memphis State TN Zip Code 38135
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 **0**

Date of Receipt **07 / 18 / 2011**
Transaction ID : 3029434
Amount of Each Receipt this Period **25**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1430 OF 2452 |
| | (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

A. Mr. William Stockard
Full Name (Last, First, Middle Initial)
Mailing Address 2640 E Cardella Rd
City Merced State CA Zip Code 95340
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 ▼ **0**

Date of Receipt **07 / 18 / 2011**
Transaction ID : 3029578
Amount of Each Receipt this Period **60**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

B. Ms. Barbara Perkins
Full Name (Last, First, Middle Initial)
Mailing Address 2009 Princeton Ave.
City Dunedin State FL Zip Code 34698
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 ▼ **0**

Date of Receipt **07 / 19 / 2011**
Transaction ID : 3029932
Amount of Each Receipt this Period **30**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

C. Ms. Barbara A. Coyle
Full Name (Last, First, Middle Initial)
Mailing Address 14339 Oka Ln.
City Los Gatos State CA Zip Code 95032
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 ▼ **0**

Date of Receipt **07 / 19 / 2011**
Transaction ID : 3030325
Amount of Each Receipt this Period **25**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1431 OF 2452 |
| | <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. Virginia M. Krall
Full Name (Last, First, Middle Initial)
Mailing Address 3038 SE 21st Street
City Gresham State OR Zip Code 97080
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 0

Date of Receipt 07 / 20 / 2011
Transaction ID : 3030589
Amount of Each Receipt this Period 50
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

B. Ms. Louise Stinchcomb
Full Name (Last, First, Middle Initial)
Mailing Address 11336 Terwilligers Valley Lane
City Cincinnati State OH Zip Code 45249
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 0

Date of Receipt 07 / 22 / 2011
Transaction ID : 3031652
Amount of Each Receipt this Period 100
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

C. Mrs. Marion Sussman
Full Name (Last, First, Middle Initial)
Mailing Address 3249 W. 65th Street
City Chicago State IL Zip Code 60629
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 0

Date of Receipt 07 / 21 / 2011
Transaction ID : 3031664
Amount of Each Receipt this Period 15
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1432 OF 2452 |
| | <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. Ellen Bell
 Full Name (Last, First, Middle Initial)
 Mailing Address 1213 Oak Bluff Court
 City Westerville State OH Zip Code 43081
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2011
Transaction ID : 3032776
 Amount of Each Receipt this Period
 10
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Ms. Joan M. Scott
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 307
 City Creston State CA Zip Code 93432
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2011
Transaction ID : 3032781
 Amount of Each Receipt this Period
 30
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Mr. Dean Lambertson
 Full Name (Last, First, Middle Initial)
 Mailing Address 9950 La Cienega St.
 City Las Vegas State NV Zip Code 89183
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2011
Transaction ID : 3032783
 Amount of Each Receipt this Period
 40
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1433 OF 2452 |
| | <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. Claire Mandeville
Full Name (Last, First, Middle Initial)

Mailing Address 91 Kitchell Lake Drive

City West Milford State NJ Zip Code 07480

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 ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 28 / 2011

Transaction ID : 3035466

Amount of Each Receipt this Period
5

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

B. Ms. Roberta Cronin
Full Name (Last, First, Middle Initial)

Mailing Address 3618 Porter Street NW

City Washington State DC Zip Code 20016

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

Name of Employer sefl Occupation research & program d

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 06 / 2011

Transaction ID : 3024351

Amount of Each Receipt this Period
37.5

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

C. Ms. Dorothy Weinstein
Full Name (Last, First, Middle Initial)

Mailing Address 2818 N. 46 Ave. K-492

City Hollywood State FL Zip Code 33021

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 ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 01 / 2011

Transaction ID : 3021744

Amount of Each Receipt this Period
50

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1434 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Eleanor Weinstock
 Full Name (Last, First, Middle Initial)
 Mailing Address 525 South Flagler Drive
 City West Palm Beach State FL Zip Code 33401
 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 ▼ 0

Date of Receipt 07 / 01 / 2011
Transaction ID : 3021748
 Amount of Each Receipt this Period 100
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Ms. Elaine Galinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 7919 Prospect Pl
 City La Jolla State CA Zip Code 92037
 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 ▼ 0

Date of Receipt 07 / 01 / 2011
Transaction ID : 3021756
 Amount of Each Receipt this Period 250
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Ms. Karen J. Keefer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1720 Valota Road
 City Redwood City State CA Zip Code 94061
 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 ▼ 0

Date of Receipt 07 / 01 / 2011
Transaction ID : 3021761
 Amount of Each Receipt this Period 50
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1435 OF 2452 |
| | <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. Marlene H Cianci | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 03 / 2011 Transaction ID : 3021806 |
| Mailing Address 1704 Glenkarney Pl City State Zip Code Silver Spring MD 20902 | | Amount of Each Receipt this Period _____ 25 Shelley Berkley Senate Cntbs |
| FEC ID number of contributing federal political committee. C _____ | Name of Employer Occupation N/A Retired | [MEMO ITEM] MEMO |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ _____ 0 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Ms. Margaret J J. DiClemente | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2011 Transaction ID : 3021810 |
| Mailing Address 15357 Mutiny Ct City State Zip Code Corpus Christi TX 78418 | | Amount of Each Receipt this Period _____ 100 Shelley Berkley Senate Cntbs |
| FEC ID number of contributing federal political committee. C _____ | Name of Employer Occupation N/A Retired | [MEMO ITEM] MEMO |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ _____ 0 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Dr. Michael Litt | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 04 / 2011 Transaction ID : 3021916 |
| Mailing Address 92 Wheatherstone Place City State Zip Code Lake Oswego OR 97035 | | Amount of Each Receipt this Period _____ 100 Shelley Berkley Senate Cntbs |
| FEC ID number of contributing federal political committee. C _____ | Name of Employer Occupation N/A Retired | [MEMO ITEM] MEMO |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ _____ 0 | |

| | |
|--|------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | _____ 0.00 |
| 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 1436 OF 2452 |
| <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. Audrey Eisenstadt
Full Name (Last, First, Middle Initial)

Mailing Address 35 Rainbow Road

City Bethany State CT Zip Code 06524

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2011

Transaction ID : 3022046

Amount of Each Receipt this Period
 50

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

B. Mr. Robert Kansas
Full Name (Last, First, Middle Initial)

Mailing Address 725 Robin Way S.

City Satellite Beach State FL Zip Code 32937

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2011

Transaction ID : 3022057

Amount of Each Receipt this Period
 50

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

C. Ms. Eleanor B. Silsby
Full Name (Last, First, Middle Initial)

Mailing Address 65 South Street

City Granby State MA Zip Code 01033

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2011

Transaction ID : 3022072

Amount of Each Receipt this Period
 25

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1437 OF 2452 |
| | (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. Ms. Jean E. Kyle | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 363 Cockle Place, SW | | Transaction ID : 3023010 |
| City Ocean Shores | State WA | Zip Code 98569 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100 |
| Name of Employer N/A | Occupation Retired | Shelley Berkley Senate Cntbs |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Ruth I. Kunin | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 470 West End Avenue Apartment 6A | | Transaction ID : 3023027 |
| City New York | State NY | Zip Code 10024 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100 |
| Name of Employer N/A | Occupation Retired | Shelley Berkley Senate Cntbs |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Rose M. Laffoon | | Date of Receipt MM / DD / YYYY 07 / 05 / 2011 |
| Mailing Address 20033 Greenwood Avenue N. | | Transaction ID : 3023044 |
| City Shoreline | State WA | Zip Code 98133 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50 |
| Name of Employer N/A | Occupation Retired | Shelley Berkley Senate Cntbs |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1438 OF 2452 |
| | (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

A. Ms. Jean J. Robinson
Full Name (Last, First, Middle Initial)

Mailing Address 9840 S Pulaski Road # 321

| | | |
|------------------|-------------|-------------------|
| City Oak Lawn | State IL | Zip Code 60453 |
|------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 05 | | 2011 |

Transaction ID : 3023056

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 00 |
|-----|---|----|

100

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

B. Ms. Sandra Rudy
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 70

| | | |
|-----------------|-------------|-------------------|
| City Alcalde | State NM | Zip Code 87511 |
|-----------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 05 | | 2011 |

Transaction ID : 3023082

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 40 |
|-----|---|----|

40

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

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

Mailing Address 17 Paddock Lane

| | | |
|-------------------|-------------|-------------------|
| City Williston | State VT | Zip Code 05495 |
|-------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 05 | | 2011 |

Transaction ID : 3023104

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 00 |
|-----|---|----|

100

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1439 OF 2452 |
| | <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. Sherry L. Haagenson
Full Name (Last, First, Middle Initial)
Mailing Address 1112 S. Rio Vista Blvd.
City Fort Lauderdale State FL Zip Code 33316
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 **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023120
Amount of Each Receipt this Period **50**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

B. Ms. Francis E. Rohde
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 2830
City Chesapeake State VA Zip Code 23327
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 **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023132
Amount of Each Receipt this Period **50**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

C. Mrs. Reva Schlesinger
Full Name (Last, First, Middle Initial)
Mailing Address 45 India Street
City Nantucket State MA Zip Code 02554
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 **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024312
Amount of Each Receipt this Period **25**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1440 OF 2452 |
| | <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. Irving Krauss
Full Name (Last, First, Middle Initial)
Mailing Address 14 Hawside Court
City Markleeville State CA Zip Code 96120
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 ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024318
Amount of Each Receipt this Period **25**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

B. Ms. Elizabeth A. Fimbres
Full Name (Last, First, Middle Initial)
Mailing Address 5820 N Pontatoc Road
City Tucson State AZ Zip Code 85718
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 ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024324
Amount of Each Receipt this Period **75**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

C. Ms. Marilyn S. Minto
Full Name (Last, First, Middle Initial)
Mailing Address 154 Beach Park Blvd.
City Foster City State CA Zip Code 94404
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 ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024361
Amount of Each Receipt this Period **30**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1441 OF 2452 (check only one) |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
EMILY's List

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Ms. Carolyn Ann A Legg | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 Transaction ID : 3024399 |
| Mailing Address 853 Washington St. | | Amount of Each Receipt this Period 50 |
| City Woodstock | State IL | Zip Code 60098 |
| FEC ID number of contributing federal political committee. C | | Shelley Berkley Senate Cntbs |
| Name of Employer N/A | Occupation Retired | [MEMO ITEM] MEMO |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Beltzer Murray | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 Transaction ID : 3024455 |
| Mailing Address 21230 23rd Ave | | Amount of Each Receipt this Period 10 |
| City Bayside | State NY | Zip Code 11360 |
| FEC ID number of contributing federal political committee. C | | Shelley Berkley Senate Cntbs |
| Name of Employer N/A | Occupation Retired | [MEMO ITEM] MEMO |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Ms. Mary Cogan | | Date of Receipt MM / DD / YYYY 07 / 06 / 2011 Transaction ID : 3024575 |
| Mailing Address PO Box 694 | | Amount of Each Receipt this Period 500 |
| City Chatham | State MA | Zip Code 02633 |
| FEC ID number of contributing federal political committee. C | | Shelley Berkley Senate Cntbs |
| Name of Employer N/A | Occupation Retired | [MEMO ITEM] MEMO |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1442 OF 2452 |
| | (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. Gloria J. Fulcher
Full Name (Last, First, Middle Initial)
Mailing Address 2925 Roanoke Ct
City Bakersfield State CA Zip Code 93306
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 ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024617
Amount of Each Receipt this Period **25**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

B. Ms. Barbara J. Drageaux
Full Name (Last, First, Middle Initial)
Mailing Address 708 SE 19th Ave
City Portland State OR Zip Code 97214
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 ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024618
Amount of Each Receipt this Period **100**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

C. Ms. Jeraldine Trabant
Full Name (Last, First, Middle Initial)
Mailing Address 726 Loveville Road Cottage 94
City Hockessin State DE Zip Code 19707
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 ▼ **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024621
Amount of Each Receipt this Period **100**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1443 OF 2452 |
| | (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

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

Mailing Address 11361 W Riverview Drive

City Post Falls State ID Zip Code 83854

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011

Transaction ID : 3024630

Amount of Each Receipt this Period
 50

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

B. Mr. Joseph Waterman
Full Name (Last, First, Middle Initial)

Mailing Address 22537 Saticoy Street

City West Hills State CA Zip Code 91307

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 06 / 2011

Transaction ID : 3024649

Amount of Each Receipt this Period
 25

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

C. Ms. Dolores Chase
Full Name (Last, First, Middle Initial)

Mailing Address 1235 E. 200 So. #402 #402

City SLC State UT Zip Code 84102

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 10 / 2011

Transaction ID : 3025524

Amount of Each Receipt this Period
 25

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1444 OF 2452 |
| | <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. Ruth Gottlieb
Full Name (Last, First, Middle Initial)

Mailing Address 3300 Dary Rd
Apt 5213

City Haverford State PA Zip Code 19041

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 ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 08 / 2011

Transaction ID : 3025530

Amount of Each Receipt this Period
50

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

B. Ms. Barbara Noonberg
Full Name (Last, First, Middle Initial)

Mailing Address 10 Beach Drive NE # 1901

City St. Petersburg State FL Zip Code 33701

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 ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 08 / 2011

Transaction ID : 3025631

Amount of Each Receipt this Period
100

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

C. Mrs. Emmy Lu Hartley
Full Name (Last, First, Middle Initial)

Mailing Address 1400 Waverly Road, # B324

City Gladwyne State PA Zip Code 19035

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 ▼ **0**

Date of Receipt
MM / DD / YYYY
07 / 08 / 2011

Transaction ID : 3025632

Amount of Each Receipt this Period
200

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1445 OF 2452 |
| | <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. Mary Jack Wintle | | Date of Receipt MM / DD / YYYY 07 / 08 / 2011 |
| Mailing Address 46 Timber Park Dr | | Transaction ID : 3025640 |
| City Black Mtn | State NC | Zip Code 28711 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100 |
| Name of Employer N/A | Occupation Retired | Shelley Berkley Senate Cntbs |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Barbara K. Andreas | | Date of Receipt MM / DD / YYYY 07 / 08 / 2011 |
| Mailing Address PO Box 436 | | Transaction ID : 3025646 |
| City Laurelville | State OH | Zip Code 43135 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50 |
| Name of Employer N/A | Occupation RETIRED | Shelley Berkley Senate Cntbs |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Ms. Grace Leight | | Date of Receipt MM / DD / YYYY 07 / 08 / 2011 |
| Mailing Address 205 W. End Avenue, Apt. 6K | | Transaction ID : 3025653 |
| City New York | State NY | Zip Code 10023 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250 |
| Name of Employer N/A | Occupation Retired | Shelley Berkley Senate Cntbs |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1446 OF 2452 |
| <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. Mr. Dennis Dismuke
Full Name (Last, First, Middle Initial)
Mailing Address 313 Peach Street

| | | |
|----------------|-------------|-------------------|
| City Exeter | State CA | Zip Code 93221 |
|----------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 08 | | 2011 |

Transaction ID : 3025661

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 00 |
|-----|---|----|

100

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

B. Mr. Herman Kurfirst
Full Name (Last, First, Middle Initial)
Mailing Address 201 Galer St Apt 54

| | | |
|-----------------|-------------|-------------------|
| City Seattle | State WA | Zip Code 98109 |
|-----------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 08 | | 2011 |

Transaction ID : 3025662

Amount of Each Receipt this Period

| | | |
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| 000 | . | 00 |
|-----|---|----|

100

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

C. Ms. Gwen J Gillis
Full Name (Last, First, Middle Initial)
Mailing Address 4722 Amberwood Court

| | | |
|------------------|-------------|-------------------|
| City Carlsbad | State CA | Zip Code 92008 |
|------------------|-------------|-------------------|

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 ▼ **0**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 11 | | 2011 |

Transaction ID : 3026145

Amount of Each Receipt this Period

| | | |
|-----|---|----|
| 000 | . | 25 |
|-----|---|----|

25

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

| | | | | |
|--|--|-----|---|----|
| SUBTOTAL of Receipts This Page (optional).....▶ | <table border="1"><tr><td>000</td><td>.</td><td>00</td></tr></table> | 000 | . | 00 |
| 000 | . | 00 | | |
| TOTAL This Period (last page this line number only).....▶ | <table border="1"><tr><td>000</td><td>.</td><td>00</td></tr></table> | 000 | . | 00 |
| 000 | . | 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 1447 OF 2452 |
| | <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. Gertrude Reed
Full Name (Last, First, Middle Initial)
Mailing Address 417 Crosslands Dr.
City Kennett Square State PA Zip Code 19348
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 ▼ 0

Date of Receipt 07 / 11 / 2011
Transaction ID : 3026173
Amount of Each Receipt this Period 50
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

B. Marilyn Gordon
Full Name (Last, First, Middle Initial)
Mailing Address 116 Walnut Grove Rd.
City Ridgefield State CT Zip Code 06877
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 ▼ 0

Date of Receipt 07 / 11 / 2011
Transaction ID : 3026192
Amount of Each Receipt this Period 10
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

C. Ms. Shirley J. Parish
Full Name (Last, First, Middle Initial)
Mailing Address 1643 North Leeds Avenue
City Ontario State CA Zip Code 91764
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 ▼ 0

Date of Receipt 07 / 11 / 2011
Transaction ID : 3026210
Amount of Each Receipt this Period 50
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1448 OF 2452 |
| | <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. Marilyn W. Reed
 Full Name (Last, First, Middle Initial)
 Mailing Address 22501 130th Street
 City Danville State IA Zip Code 52623
 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 ▼ **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026219
 Amount of Each Receipt this Period **100**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Merryl J. Weber
 Full Name (Last, First, Middle Initial)
 Mailing Address 5808 Varna Ave
 City Van Nuys State CA Zip Code 91401
 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 ▼ **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026229
 Amount of Each Receipt this Period **100**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Ms. Suzanne R. Robinson
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 Circle Wood Road
 City Rochester State NY Zip Code 14625
 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 ▼ **0**

Date of Receipt **07 / 11 / 2011**
Transaction ID : 3026239
 Amount of Each Receipt this Period **25**
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1449 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

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

Mailing Address 4000 Cathedral Avenue NW
Apt. 106B

City Washington State DC Zip Code 20016

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2011

Transaction ID : 3026792

Amount of Each Receipt this Period
100

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Ms. Jane Long

Mailing Address 160 W. Park Street

City Carlisle State PA Zip Code 17013

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2011

Transaction ID : 3026799

Amount of Each Receipt this Period
100

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Ms. Dianne Durrwachter

Mailing Address 809 West 5th Street

City Port Angeles State WA Zip Code 98363

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 12 / 2011

Transaction ID : 3027097

Amount of Each Receipt this Period
50

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1450 OF 2452 |
| | <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 Marshall
Full Name (Last, First, Middle Initial)
Mailing Address 31 Pochet Road
City Orleans State MA Zip Code 02653
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 **0**

Date of Receipt **07 / 13 / 2011**
Transaction ID : 3027293
Amount of Each Receipt this Period **25**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

B. Loyc Y. Jones
Full Name (Last, First, Middle Initial)
Mailing Address 1811 Redtop Court
City Longmont State CO Zip Code 80503
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 **0**

Date of Receipt **07 / 13 / 2011**
Transaction ID : 3027355
Amount of Each Receipt this Period **20**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

C. Ms. Doris Lauzon
Full Name (Last, First, Middle Initial)
Mailing Address 32629 Anita Drive
City Westland State MI Zip Code 48185
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 **0**

Date of Receipt **07 / 14 / 2011**
Transaction ID : 3027415
Amount of Each Receipt this Period **200**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1451 OF 2452 |
| | (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. Mrs. Marion M. Morgan

Mailing Address 930 28th St
Apt 256

City Boulder State CO Zip Code 80303

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 ▼ **0**

Date of Receipt
07 / 14 / 2011

Transaction ID : 3027418

Amount of Each Receipt this Period
100

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Ms. Jane Walsh

Mailing Address 2545 Dorset Rd

City Columbus State OH Zip Code 43221

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 ▼ **0**

Date of Receipt
07 / 14 / 2011

Transaction ID : 3027425

Amount of Each Receipt this Period
100

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Ms. Pamela K. Lopes

Mailing Address 1421 N Camino de Juan

City Tucson State AZ Zip Code 85745

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 ▼ **0**

Date of Receipt
07 / 14 / 2011

Transaction ID : 3027650

Amount of Each Receipt this Period
50

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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 1452 OF 2452 |
| | <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. Vivian E. Uttermann | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 14 / 2011 Transaction ID : 3027658 |
| Mailing Address 11113 Jollyway | | Amount of Each Receipt this Period 12.5 Shelley Berkley Senate Cntbs |
| City Kensington State MD Zip Code 20895 | | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer N/A Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Kay Cooper | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 15 / 2011 Transaction ID : 3028191 |
| Mailing Address 6501 Meadow View Road | | Amount of Each Receipt this Period 50 Shelley Berkley Senate Cntbs |
| City Hillsborough State NC Zip Code 27278 | | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer N/A Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mrs. Patricia M. Rosenthal | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 15 / 2011 Transaction ID : 3029265 |
| Mailing Address 1717 S. Prairie Ave. #1310 | | Amount of Each Receipt this Period 100 Shelley Berkley Senate Cntbs |
| City Chicago State IL Zip Code 60616 | | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer N/A Occupation Retired | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | |

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|---|------|
| SUBTOTAL of Receipts This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | 0.00 |

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

| | |
|---|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 1453 OF 2452 |
| | (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. Ms. Mary Ann Schwarzbach | | Date of Receipt MM / DD / YYYY 07 / 15 / 2011 |
| Mailing Address 1620 Pankow Dr | | Transaction ID : 3029267 |
| City Geneva | State IL | Zip Code 60134 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100 |
| Name of Employer N/A | Occupation Retired | Shelley Berkley Senate Cntbs |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Elaine K. Cowles | | Date of Receipt MM / DD / YYYY 07 / 18 / 2011 |
| Mailing Address 540 Amphill Rd | | Transaction ID : 3029500 |
| City Cartersville | State VA | Zip Code 23027 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25 |
| Name of Employer N/A | Occupation Retired | Shelley Berkley Senate Cntbs |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | | |
|---|-------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mrs. Emiy B. Rutherford | | Date of Receipt MM / DD / YYYY 07 / 19 / 2011 |
| Mailing Address 2862 Raccoon Valley | | Transaction ID : 3029818 |
| City Granville | State OH | Zip Code 43023 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 111.11 |
| Name of Employer N/A | Occupation Retired | Shelley Berkley Senate Cntbs |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 0 | [MEMO ITEM] MEMO |

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1455 OF 2452 |
| | <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. Margaret Weitkamp
Full Name (Last, First, Middle Initial)

Mailing Address 7 Marchant Ct

City Kensington State CA Zip Code 94707

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2011

Transaction ID : 3030300

Amount of Each Receipt this Period
 25

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

B. Mr. Edward R. Robertson
Full Name (Last, First, Middle Initial)

Mailing Address 2 Greens Way

City Denver State PA Zip Code 17517

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2011

Transaction ID : 3030314

Amount of Each Receipt this Period
 25

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

C. Mr. Floyd H. Nordland
Full Name (Last, First, Middle Initial)

Mailing Address 16313 Somerset Dr

City Broomfield State CO Zip Code 80023

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2011

Transaction ID : 3031997

Amount of Each Receipt this Period
 50

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1456 OF 2452 |
| | (check only one) |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| <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

A. Ms. Leah Horwitz
Full Name (Last, First, Middle Initial)

Mailing Address 305 Savage Farm Drive

City Ithaca State NY Zip Code 14850

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2011

Transaction ID : 3032028

Amount of Each Receipt this Period
 200

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

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

Mailing Address 10041 Resmar Pl.

City La Mesa State CA Zip Code 91941

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 25 / 2011

Transaction ID : 3032771

Amount of Each Receipt this Period
 50

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

C. Col. Billie M. Bobbitt
Full Name (Last, First, Middle Initial)

Mailing Address 5830 North Fountains Avenue
Apartment # 226

City Tucson State AZ Zip Code 85704

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2011

Transaction ID : 3032961

Amount of Each Receipt this Period
 500

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1457 OF 2452 |
| | <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 N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 27 / 2011
Transaction ID : 3035039
Amount of Each Receipt this Period 200
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

B. Ms. Marion P. Harris
Full Name (Last, First, Middle Initial)
Mailing Address 11 Williams St
City Arlington State MA Zip Code 02476
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 ▼ 0

Date of Receipt 07 / 26 / 2011
Transaction ID : 3035092
Amount of Each Receipt this Period 25
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

c. Dr. Mary Gergen
Full Name (Last, First, Middle Initial)
Mailing Address 331 Rogers Lane
City Wallingford State PA Zip Code 19086
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 ▼ 0

Date of Receipt 07 / 26 / 2011
Transaction ID : 3035099
Amount of Each Receipt this Period 50
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1458 OF 2452 |
| | <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. Patricia C. Ashbrook
Full Name (Last, First, Middle Initial)

Mailing Address 1330 Massachusetts Av NW
Apt. 622

City Washington State DC Zip Code 20005

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 ▼ **0**

Date of Receipt
07 / 27 / 2011

Transaction ID : 3035104

Amount of Each Receipt this Period
25

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

B. Ms. Louise Bockall
Full Name (Last, First, Middle Initial)

Mailing Address 34132 Village 34

City Camarillo State CA Zip Code 93012

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 ▼ **0**

Date of Receipt
07 / 28 / 2011

Transaction ID : 3035465

Amount of Each Receipt this Period
25

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

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

Mailing Address 2280 Dant Blvd

City Reno State NV Zip Code 89509

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 ▼ **0**

Date of Receipt
07 / 28 / 2011

Transaction ID : 3035643

Amount of Each Receipt this Period
100

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

| | |
|--|-------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1459 OF 2452 |
| | <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. Ella M Forsyth
 Full Name (Last, First, Middle Initial)
 Mailing Address 219 Graham st
 City Carlisle State PA Zip Code 17013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dickinson College (former) Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2011
Transaction ID : 3035667
 Amount of Each Receipt this Period
 100
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Ms. Hermia Hyams
 Full Name (Last, First, Middle Initial)
 Mailing Address 5091 Mountain Top Circle
 City Las Vegas State NV Zip Code 89148
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2011
Transaction ID : 3035669
 Amount of Each Receipt this Period
 50
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Mr. Richard Ellegood
 Full Name (Last, First, Middle Initial)
 Mailing Address 1000 SW Vista Avenue # 919
 City Portland State OR Zip Code 97205
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2011
Transaction ID : 3035672
 Amount of Each Receipt this Period
 100
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1460 OF 2452 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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

Full Name (Last, First, Middle Initial)
A. Katherine Lyse

Mailing Address 3306 NE 65th Ave

City Portland State OR Zip Code 97213

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 29 / 2011

Transaction ID : 3035778

Amount of Each Receipt this Period
50

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
B. Ms. Sue Kilrain

Mailing Address 1800 Purdy Ave, #1002 Apt.1002

City Miami Beach State FL Zip Code 33139

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 30 / 2011

Transaction ID : 3035804

Amount of Each Receipt this Period
100

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

Full Name (Last, First, Middle Initial)
C. Mrs. Lucille Celia Behrens

Mailing Address 63 South Lilburn Drive

City Garnerville State NY Zip Code 10923

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 ▼ **0**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2011

Transaction ID : 3035814

Amount of Each Receipt this Period
20

Shelley Berkley Senate Cntbs

[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ **0.00**

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 1461 OF 2452 |
| | <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. Jean Woodruff
 Full Name (Last, First, Middle Initial)
 Mailing Address 5225 Wilson Lane, Apt 1123
 City Mechanicsburg State PA Zip Code 17055
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2011
Transaction ID : 3035898
 Amount of Each Receipt this Period
 50
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Ms. Arlene Bender
 Full Name (Last, First, Middle Initial)
 Mailing Address 7919 Via Ensenada
 City Carlsbad State CA Zip Code 92009
 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 ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 29 / 2011
Transaction ID : 3035908
 Amount of Each Receipt this Period
 110
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Mrs. Kathleen J. Bavelas
 Full Name (Last, First, Middle Initial)
 Mailing Address 56 Pratt Lane
 City Wolcott State CT Zip Code 06716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gateway C C Occupation retired but part-tim
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2011
Transaction ID : 3026118
 Amount of Each Receipt this Period
 30
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1462 OF 2452 |
| | <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. Shirley Lindquist
 Full Name (Last, First, Middle Initial)
 Mailing Address 6555 Parkpoint Way NE
 City Seattle State WA Zip Code 98115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation retired teacher
 Receipt For: Primary General Other (specify)

Date of Receipt 07 / 06 / 2011
Transaction ID : 3024230
 Amount of Each Receipt this Period 10
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. Mr. Randall Shields
 Full Name (Last, First, Middle Initial)
 Mailing Address 1423 w. maple st.
 City Kalamazoo State MI Zip Code 49008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation sales
 Receipt For: Primary General Other (specify)

Date of Receipt 07 / 12 / 2011
Transaction ID : 3026804
 Amount of Each Receipt this Period 100
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Ms. Jeanne Elkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 1537 Westminster Dr Apt. 112
 City Naperville State IL Zip Code 60563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Argonne National Lab Occupation Scientist
 Receipt For: Primary General Other (specify)

Date of Receipt 07 / 20 / 2011
Transaction ID : 3030595
 Amount of Each Receipt this Period 25
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1463 OF 2452 |
| | <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. Jean A. Wolff
 Full Name (Last, First, Middle Initial)
 Mailing Address 10543 Garwood Pl
 City Los Angeles State CA Zip Code 90024
 Date of Receipt 07 / 18 / 2011
 Transaction ID : 3029415
 Amount of Each Receipt this Period 200
 Shelley Berkley Senate Cntbs
 [MEMO ITEM] MEMO
 FEC ID number of contributing federal political committee. C
 Name of Employer Self Occupation Sculptor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 0

B. Ms. Paula Susemichel
 Full Name (Last, First, Middle Initial)
 Mailing Address 5703 Broadway Street
 City Indianapolis State IN Zip Code 46220
 Date of Receipt 07 / 20 / 2011
 Transaction ID : 3031034
 Amount of Each Receipt this Period 200
 Shelley Berkley Senate Cntbs
 [MEMO ITEM] MEMO
 FEC ID number of contributing federal political committee. C
 Name of Employer DPS, Inc. Occupation Senior Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 0

C. Asherah Cinnamon
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 Wildwood Cir.
 City Portland State ME Zip Code 04103
 Date of Receipt 07 / 05 / 2011
 Transaction ID : 3023103
 Amount of Each Receipt this Period 200
 Shelley Berkley Senate Cntbs
 [MEMO ITEM] MEMO
 FEC ID number of contributing federal political committee. C
 Name of Employer Self Occupation Social Worker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 0

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1464 OF 2452 |
| | <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. Ian E. Stockdale
Full Name (Last, First, Middle Initial)
Mailing Address 601 Forest Avenue
City Palo Alto State CA Zip Code 94301
FEC ID number of contributing federal political committee. **C**
Name of Employer Inktomi Corporation Occupation Software Engineer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 05 / 2011**
Transaction ID : 3023032
Amount of Each Receipt this Period **200**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

B. Mr. Jim Perry
Full Name (Last, First, Middle Initial)
Mailing Address 2406 Tatnuck Ct
City Herndon State VA Zip Code 20171
FEC ID number of contributing federal political committee. **C**
Name of Employer International Display Systems Occupation Sys Admin
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 04 / 2011**
Transaction ID : 3021922
Amount of Each Receipt this Period **80**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

C. Ms. Joyce Heran
Full Name (Last, First, Middle Initial)
Mailing Address 13608 S. Village Drive
City Tampa State FL Zip Code 33618
FEC ID number of contributing federal political committee. **C**
Name of Employer Hillsborough Co. Schools Occupation Teacher
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **0**

Date of Receipt **07 / 06 / 2011**
Transaction ID : 3024650
Amount of Each Receipt this Period **20**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1465 OF 2452 |
| | <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. Liana Crabtree
 Full Name (Last, First, Middle Initial)
 Mailing Address 20378 Clay Street
 City State Zip Code
 Cupertino CA 95014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Siemens Technical Writer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 28 / 2011
Transaction ID : 3035684
 Amount of Each Receipt this Period
 50
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

B. ann kirkpatrick
 Full Name (Last, First, Middle Initial)
 Mailing Address 432 W Cattle Drive Trail
 City State Zip Code
 Flagstaff AZ 86001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None unemployed
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 09 / 2011
Transaction ID : 3025450
 Amount of Each Receipt this Period
 30
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

C. Mr. Neil Elliott
 Full Name (Last, First, Middle Initial)
 Mailing Address 3215 Cliff Drive
 City State Zip Code
 Santa Barbara CA 93109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Unemployed
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 0

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2011
Transaction ID : 3026218
 Amount of Each Receipt this Period
 15
 Shelley Berkley Senate Cntbs
[MEMO ITEM]
 MEMO

| | |
|--|------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| 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 1466 OF 2452 |
| | <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. Neil Elliott
Full Name (Last, First, Middle Initial)
Mailing Address 3215 Cliff Drive
City Santa Barbara State CA Zip Code 93109
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Unemployed
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0**

Date of Receipt **07 / 12 / 2011**
Transaction ID : 3027089
Amount of Each Receipt this Period **15**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

B. Ms. Amy Thomson
Full Name (Last, First, Middle Initial)
Mailing Address 1505 SW Alaska St.
City Seattle State WA Zip Code 98106
FEC ID number of contributing federal political committee. **C**
Name of Employer Self employed Occupation WRiter
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0**

Date of Receipt **07 / 12 / 2011**
Transaction ID : 3027079
Amount of Each Receipt this Period **50**
Shelley Berkley Senate Cntbs
[MEMO ITEM]
MEMO

C. John Auyong
Full Name (Last, First, Middle Initial)
Mailing Address 835 1/2 South Sycamore Avenue
City Los Angeles State CA Zip Code 90036
FEC ID number of contributing federal political committee. **C**
Name of Employer Social Security Administration Occupation Attorney Advisor
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **0**

Date of Receipt **07 / 03 / 2011**
Transaction ID : 3021668
Amount of Each Receipt this Period **10**
Tarryl Clark Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... **0.00**
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 1467 OF 2452 |
| | <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. Nan Guslander
Full Name (Last, First, Middle Initial)
Mailing Address 5501A Balcones Drive
City Austin State TX Zip Code 78731
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation investor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 18 / 2011
Transaction ID : 3029479
Amount of Each Receipt this Period 50
Tarryl Clark Contributions
[MEMO ITEM]
MEMO

B. Ms. Karen J. Keefer
Full Name (Last, First, Middle Initial)
Mailing Address 1720 Valota Road
City Redwood City State CA Zip Code 94061
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 ▼ 0

Date of Receipt 07 / 01 / 2011
Transaction ID : 3021763
Amount of Each Receipt this Period 100
Tarryl Clark Contributions
[MEMO ITEM]
MEMO

C. 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 N/A Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 0

Date of Receipt 07 / 27 / 2011
Transaction ID : 3035041
Amount of Each Receipt this Period 100
Tarryl Clark Contributions
[MEMO ITEM]
MEMO

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
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 1468 OF 2452
(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. Katherine Lyse

Mailing Address 3306 NE 65th Ave

City Portland State OR Zip Code 97213

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 ▼ **0**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 29 / 2011

Transaction ID : 3035780

Amount of Each Receipt this Period
50

Tarryl Clark Contributions

[MEMO ITEM]
MEMO

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

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

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 Y Y

Amount of Each Receipt this Period

| | |
|--|------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 0.00 |
| TOTAL This Period (last page this line number only).....▶ | 526950.82 |

**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 1469 OF 2452 |
| <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. Glover Park PAC | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 4152570 |
| Mailing Address 607 14th St NW Ste 800 | | Amount of Each Receipt this Period 2500.00 |
| City Washington | State DC Zip Code 20005 | |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date ▼ 2500.00 |
| Name of Employer | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------|---|
| Full Name (Last, First, Middle Initial) B. Common Sense Colorado PAC | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2011 Transaction ID : 5152570 |
| Mailing Address PO Box 1978 | | Amount of Each Receipt this Period 5000.00 |
| City Denver | State CO Zip Code 80201 | |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date ▼ 5000.00 |
| Name of Employer | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|----------------|--|
| Full Name (Last, First, Middle Initial) C. | | Date of Receipt M M M / D D D / Y Y Y Y Y Y |
| Mailing Address | | Amount of Each Receipt this Period |
| City | State Zip Code | |
| FEC ID number of contributing federal political committee. C | | Aggregate Year-to-Date ▼ |
| Name of Employer | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 7500.00 |
| TOTAL This Period (last page this line number only).....▶ | 7500.00 |

**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 1470 OF 2452 |
| <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 P.O. 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 |
| 12 | / | 01 | / | 2011 |

Transaction ID : 9001

Amount of Each Receipt this Period

| |
|---------|
| 7020.00 |
|---------|

Sublease Rent at Fair Market Value

Orig Vendor: Jack I Bender and Sons

B. Grassroots Solutions
Full Name (Last, First, Middle Initial)
Mailing Address 1120 Connecticut Ave, NW

| | | |
|--------------------|-------------|-------------------|
| 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 ▼ **0.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 08 | / | 2011 |

Transaction ID : 9002

Amount of Each Receipt this Period

| |
|---------|
| 3120.00 |
|---------|

Sublease Rent at Fair Market Value

Orig Vendor: Jack I Bender and Sons

C. WeConnect International
Full Name (Last, First, Middle Initial)
Mailing Address 1120 Connecticut Ave, NW

| | | |
|--------------------|-------------|-------------------|
| 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 ▼ **0.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 13 | / | 2011 |

Transaction ID : 9003

Amount of Each Receipt this Period

| |
|---------|
| 2000.00 |
|---------|

Sublease Rent at Fair Market Value

Orig Vendor: Jack I Bender and Sons

| | |
|--|-----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 12140.00 |
| 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 1471 OF 2452 |
| <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. Premium Payment Services

Mailing Address PO Box 2998

City Alpharetta State GA Zip Code 30023

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
 12 / 15 / 2011
Transaction ID : 9004

Amount of Each Receipt this Period
 1478.49

Health Insurance Refund

Orig Vendor: Care First

Full Name (Last, First, Middle Initial)
B. Project New West

Mailing Address 191 University Blvd. #831

City Denver State CO Zip Code 80206

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
 12 / 15 / 2011
Transaction ID : 9005

Amount of Each Receipt this Period
 553.48

Overpayment Refund

Full Name (Last, First, Middle Initial)
C. Friends of Mazie

Mailing Address PO BOX 677

City Honolulu State HI Zip Code 90023

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
 12 / 20 / 2011
Transaction ID : 9006

Amount of Each Receipt this Period
 6979.56

Mailing Expenses at Fair Market Value

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 9011.53 |
| TOTAL This Period (last page this line 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 1472 OF 2452 |
| <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. Ellen Malcolm
Full Name (Last, First, Middle Initial)

Mailing Address 1120 Connecticut Ave, NW
Suite 1100

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 ▼
0.00

Date of Receipt
12 / 30 / 2011
Transaction ID : 9000

Amount of Each Receipt this Period
102.42

Travel/Accom/Meals at Fair Market Value

Orig Vendor: Red Top Cab

B. Friends of Lois Capps
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 23940

City Santa Barbara State CA Zip Code 93121

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
12 / 31 / 2011
Transaction ID : 9008

Amount of Each Receipt this Period
2.15

Credit Card Processing Fees at Fair Market Value

C. Friends of Elizabeth Esty
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 61

City Cheshire State CT Zip Code 06410

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
12 / 31 / 2011
Transaction ID : 9009

Amount of Each Receipt this Period
10.25

Credit Card Processing Fees at Fair Market Value

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 114.82 |
| TOTAL This Period (last page this line 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 1473 OF 2452 |
| <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. Susan Bysiewics for Connecticut
 Full Name (Last, First, Middle Initial)
 Mailing Address 90 Court Street
 City Middletown State CT Zip Code 06457
 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
 12 / 31 / 2011
Transaction ID : 9007
 Amount of Each Receipt this Period 75.27
 Credit Card Processing Fees at Fair Market Value

B. Feinstein for Senate
 Full Name (Last, First, Middle Initial)
 Mailing Address 555 Capitol Mall
 City Sacramento State CA Zip Code 95814
 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
 12 / 31 / 2011
Transaction ID : 9010
 Amount of Each Receipt this Period 28.01
 Credit Card Processing Fees at Fair Market Value

C. Committee to Elect Michelle Lujan Grisham
 Full Name (Last, First, Middle Initial)
 Mailing Address 2015 Dietz PI NW
 City Albuquerque State NM Zip Code 87107
 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
 12 / 31 / 2011
Transaction ID : 9011
 Amount of Each Receipt this Period 0.38
 Credit Card Processing Fees at Fair Market Value

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 103.66 |
| 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 1474 OF 2452 |
| <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. Klobuchar for Minnesota
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 4146

| | | |
|-----------------|-------------|-------------------|
| City St Paul | State MN | Zip Code 55104 |
|-----------------|-------------|-------------------|

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 |
| 12 | / | 31 | / | 2011 |

Transaction ID : 90012

Amount of Each Receipt this Period
42.86

Credit Card Processing Fees at Fair Market Value

B. Titus for Congress
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 50614

| | | |
|-------------------|-------------|-------------------|
| City Henderson | State NV | Zip Code 89106 |
|-------------------|-------------|-------------------|

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 |
| 12 | / | 31 | / | 2011 |

Transaction ID : 90013

Amount of Each Receipt this Period
2.80

Credit Card Processing Fees at Fair Market Value

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).....▶ | 45.66 |
| TOTAL This Period (last page this line number only).....▶ | 21415.67 |

**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 1475 OF 2452 |
| <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

A. Merrill Lynch
Full Name (Last, First, Middle Initial)
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 ▼ 0.00

Date of Receipt
12 / 20 / 2011
Transaction ID : 900917
Amount of Each Receipt this Period 2524.95
Sale of 100 Shs Hewlett Packard
Orig Cntrb: Howard Poulter 12/19/11

B. Merrill Lynch
Full Name (Last, First, Middle Initial)
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 ▼ 0.00

Date of Receipt
12 / 21 / 2011
Transaction ID : 900916
Amount of Each Receipt this Period 768.62
Sale of 27 Shs Cinn Fincl Crp
Orig Cntrb: Susan Bernstein 12/21/11

C. Bank of America
Full Name (Last, First, Middle Initial)
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 ▼ 364.17

Date of Receipt
12 / 31 / 2011
Transaction ID : 900913
Amount of Each Receipt this Period 27.04
Interest

SUBTOTAL of Receipts This Page (optional).....▶ 3320.61
TOTAL This Period (last page this line 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 1476 OF 2452 |
| <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 M M / D D / Y Y Y Y Y 12 / 31 / 2011 Transaction ID : 900914 |
| Mailing Address 1501 Pennsylvania Ave, NW | | Amount of Each Receipt this Period 10.09 |
| City Washington State DC Zip Code 20005 | FEC ID number of contributing federal political committee. C | Sweep Interest |
| Name of Employer Occupation | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 147.14 |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Merrill Lynch | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2011 Transaction ID : 900915 |
| Mailing Address 1152 15th St, NW | | Amount of Each Receipt this Period 2.37 |
| City Washington State DC Zip Code 20005 | FEC ID number of contributing federal political committee. C | Dividend |
| Name of Employer Occupation | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 50.18 |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. | | Date of Receipt M M / D D / Y Y Y Y Y |
| Mailing Address | | Amount of Each Receipt this Period |
| City State Zip Code | FEC ID number of contributing federal political committee. C | |
| Name of Employer Occupation | Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 12.46 |
| TOTAL This Period (last page this line number only).....▶ | 3333.07 |

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
12 / 01 / 2011

Transaction ID : SB21B-169895

Amount of Each Disbursement this Period

10186.04

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
Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB21B-169893

Amount of Each Disbursement this Period

2225.76

Full Name (Last, First, Middle Initial)

C. ADP, Inc

Mailing Address PO Box 9001007

City Louisville State KY Zip Code 40290

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
12 / 01 / 2011

Transaction ID : SB21B-169359

Amount of Each Disbursement this Period

132.29

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

12544.09

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. Armfield Harrison & Thomas Inc

Mailing Address 20 South King Street

City Leesburg State VA Zip Code 20175

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

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB21B-169360

Amount of Each Disbursement this Period

7.00

Full Name (Last, First, Middle Initial)

B. Atomic

Mailing Address 615 North 3rd Street

City Minneapolis State MN Zip Code 55401

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
12 / 01 / 2011

Transaction ID : SB21B-169361

Amount of Each Disbursement this Period

12571.18

Full Name (Last, First, Middle Initial)

C. Emily Beardsley

Mailing Address 1776 Lanier Place NW #5C

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
12 / 01 / 2011

Transaction ID : SB21B-169362

Amount of Each Disbursement this Period

34.12

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

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

12612.30

**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. The Benson Strategy Group

Mailing Address 720 S. Colorado Blvd #500N

City Denver State CO Zip Code 80246

Purpose of Disbursement Polling/Surveys

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2011

Transaction ID : SB21B-169363

Amount of Each Disbursement this Period: 32350.00

Category/Type

Full Name (Last, First, Middle Initial)

B. The Benson Strategy Group

Mailing Address 720 S. Colorado Blvd #500N

City Denver State CO Zip Code 80246

Purpose of Disbursement Polling/Surveys

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2011

Transaction ID : SB21B-169364

Amount of Each Disbursement this Period: 9250.00

Category/Type

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 Internet Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 01 / 2011

Transaction ID : SB21B-169369

Amount of Each Disbursement this Period: 49.95

See Attached Memo Entry

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 41649.95

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. Verizon

Mailing Address PO Box 1

City Worcester State MA Zip Code 01654

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
12 / 01 / 2011

Transaction ID : SB21B-169369-10000

Amount of Each Disbursement this Period

49.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Cogent Communications, Inc.

Mailing Address P.O. Box 791087

City Baltimore State MD Zip Code 21279-1087

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
12 / 01 / 2011

Transaction ID : SB21B-169370

Amount of Each Disbursement this Period

6345.86

Full Name (Last, First, Middle Initial)

C. 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) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB21B-169371

Amount of Each Disbursement this Period

276.57

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

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

6622.43

**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) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB21B-169372

Amount of Each Disbursement this Period

1106.28

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) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB21B-169377

Amount of Each Disbursement this Period

88.29

Full Name (Last, First, Middle Initial)

C. 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

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB21B-169379

Amount of Each Disbursement this Period

777.93

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

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

1972.50

**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. 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
12 / 01 / 2011

Transaction ID : SB21B-169380

Amount of Each Disbursement this Period

331.25

Full Name (Last, First, Middle Initial)

B. Laser Line

Mailing Address 1025 W. Nursery Rd Suite 122

City Linthicum State MD Zip Code 21090

Purpose of Disbursement
Computer Hardware

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB21B-169381

Amount of Each Disbursement this Period

3144.00

Full Name (Last, First, Middle Initial)

C. 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
12 / 01 / 2011

Transaction ID : SB21B-169384

Amount of Each Disbursement this Period

1726.35

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

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

5201.60

**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. 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

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB21B-169385

Amount of Each Disbursement this Period

1000.00

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
Deliveries

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB21B-169386

Amount of Each Disbursement this Period

207.83

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
12 / 01 / 2011

Transaction ID : SB21B-169387

Amount of Each Disbursement this Period

6856.50

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

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

8064.33

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. 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
12 / 01 / 2011

Transaction ID : SB21B-169389

Amount of Each Disbursement this Period

132.19

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) ▼

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB21B-169394

Amount of Each Disbursement this Period

1893.09

Full Name (Last, First, Middle Initial)

C. Purchase Power

Mailing Address PO Box 371874

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement
Repairs Maintenance

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB21B-169395

Amount of Each Disbursement this Period

815.88

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

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

2841.16

**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)

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| <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. Kristen Schultz

Mailing Address 1209 Wells St

City Ann Arbor State MI Zip Code 48104

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
12 / 01 / 2011

Transaction ID : SB21B-169398

Amount of Each Disbursement this Period

2100.00

Full Name (Last, First, Middle Initial)

B. SD&A Teleservices, Inc.

Mailing Address 5757 West Century Blvd
Ste 300

City Los Angeles State CA Zip Code 90045

Purpose of Disbursement
Phone Banks

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB21B-169399

Amount of Each Disbursement this Period

3165.00

Full Name (Last, First, Middle Initial)

C. SD&A Teleservices, Inc.

Mailing Address 5757 West Century Blvd
Ste 300

City Los Angeles State CA Zip Code 90045

Purpose of Disbursement
Phone Banks

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB21B-169400

Amount of Each Disbursement this Period

3230.00

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

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

8495.00

**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)

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| <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. SD&A Teleservices, Inc.

Mailing Address 5757 West Century Blvd
Ste 300

City Los Angeles State CA Zip Code 90045

Purpose of Disbursement
Phone Banks

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
12 / 01 / 2011

Transaction ID : SB21B-169401

Amount of Each Disbursement this Period

1025.00

Full Name (Last, First, Middle Initial)

B. SD&A Teleservices, Inc.

Mailing Address 5757 West Century Blvd
Ste 300

City Los Angeles State CA Zip Code 90045

Purpose of Disbursement
Phone Banks

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
12 / 01 / 2011

Transaction ID : SB21B-169402

Amount of Each Disbursement this Period

1593.75

Full Name (Last, First, Middle Initial)

C. Melanie Smith

Mailing Address 49 Quincy Place, 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 M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB21B-169403

Amount of Each Disbursement this Period

13.92

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

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

2632.67

**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 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. Nicole Vance

Mailing Address 1302 Massachusetts Avenue, SE

City Washington State DC Zip Code 20003

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
12 / 01 / 2011

Transaction ID : SB21B-169405

Amount of Each Disbursement this Period

37.00

Full Name (Last, First, Middle Initial)

B. Michael Wooster

Mailing Address 255 SW Harrison Street
Unit 25B

City Portland State OR Zip Code 97201

Purpose of Disbursement
Website Development & Design

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB21B-169406

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

C. 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
12 / 01 / 2011

Transaction ID : SB21B-169407

Amount of Each Disbursement this Period

447.05

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

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

1184.05

**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)

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| <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) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2011

Transaction ID : SB21B-169900

Amount of Each Disbursement this Period

28.20

Full Name (Last, First, Middle Initial)

B. 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) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2011

Transaction ID : SB21B-169898

Amount of Each Disbursement this Period

856.90

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
12 / 02 / 2011

Transaction ID : SB21B-169899

Amount of Each Disbursement this Period

656.66

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

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

1541.76

**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"/> 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. 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

MM / DD / YYYY
12 / 05 / 2011

Transaction ID : SB21B-171111

Amount of Each Disbursement this Period

432.71

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 0001

City Chicago State IL Zip Code 60679

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
12 / 05 / 2011

Transaction ID : SB21B-169897

Amount of Each Disbursement this Period

332.42

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

MM / DD / YYYY
12 / 05 / 2011

Transaction ID : SB21B-169896

Amount of Each Disbursement this Period

15067.57

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

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

15832.70

**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 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 Burris

Mailing Address 3945 Connecticut 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

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 05 | / | 2011 |

Transaction ID : SB21B-169408

Amount of Each Disbursement this Period

| |
|--------|
| 738.67 |
|--------|

Full Name (Last, First, Middle Initial)

B. Sarah Burris

Mailing Address 3945 Connecticut 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

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 05 | / | 2011 |

Transaction ID : SB21B-169409

Amount of Each Disbursement this Period

| |
|--------|
| 309.95 |
|--------|

Full Name (Last, First, Middle Initial)

C. Sarah Burris

Mailing Address 3945 Connecticut 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

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 05 | / | 2011 |

Transaction ID : SB21B-169410

Amount of Each Disbursement this Period

| |
|---------|
| 2831.96 |
|---------|

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

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

| |
|---------|
| 3880.58 |
|---------|

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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)

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| <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 Postmaster

Mailing Address 1400 L Street NW

City Washington State DC Zip Code 20005

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
12 / 06 / 2011

Transaction ID : SB21B-169411

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. American Express Travel Related Services Co Inc

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
12 / 08 / 2011

Transaction ID : SB21B-169413

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

C. Aramark Refreshment Services

Mailing Address 8420 Stayton Drive, Ste. N

City Jessup State MD Zip Code 20794

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
12 / 08 / 2011

Transaction ID : SB21B-169414

Amount of Each Disbursement this Period

111.96

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

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

5126.96

**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)

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| <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 State Zip Code
Rockville MD 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
12 / 08 / 2011

Transaction ID : SB21B-169415

Amount of Each Disbursement this Period

272.61

Full Name (Last, First, Middle Initial)

B. Benjamin Office Supply

Mailing Address 760 East Gude Drive

City State Zip Code
Rockville MD 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
12 / 08 / 2011

Transaction ID : SB21B-169416

Amount of Each Disbursement this Period

222.99

Full Name (Last, First, Middle Initial)

C. Benjamin Office Supply

Mailing Address 760 East Gude Drive

City State Zip Code
Rockville MD 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
12 / 08 / 2011

Transaction ID : SB21B-169417

Amount of Each Disbursement this Period

84.73

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

580.33

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)

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| <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
Travel/Accommodation /Meals

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-169419

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Kimberly Coleman

Mailing Address 2151 California Street NW
Apt 102

City Washington State DC Zip Code 20008

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

/ /

Transaction ID : SB21B-169421

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. California State University, East Bay

Mailing Address Cashier's Office SA1200
25800 Carlos Bee Blvd

City Hayward State CA Zip Code 94542

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

/ /

Transaction ID : SB21B-169422

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)

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| <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. 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) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : **SB21B-169423**

Amount of Each Disbursement this Period

| |
|---------|
| 8000.00 |
|---------|

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

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : **SB21B-169426**

Amount of Each Disbursement this Period

| |
|--------|
| 236.40 |
|--------|

Full Name (Last, First, Middle Initial)

C. 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

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : **SB21B-169427**

Amount of Each Disbursement this Period

| |
|-------|
| 52.50 |
|-------|

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

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

| |
|---------|
| 8288.90 |
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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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Jefferson St. Strategies Attn: Jesse Berney

Mailing Address 428 Jefferson St NW

City Washington State DC Zip Code 20011

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
12 / 08 / 2011

Transaction ID : SB21B-169428

Amount of Each Disbursement this Period

4200.00

Full Name (Last, First, Middle Initial)

B. Jennifer Treat

Mailing Address 3250 Tennyson Street NW

City Washington State DC Zip Code 20015

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
12 / 08 / 2011

Transaction ID : SB21B-169429

Amount of Each Disbursement this Period

15000.00

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
12 / 08 / 2011

Transaction ID : SB21B-169430

Amount of Each Disbursement this Period

38.00

See Attached Memo Entry

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

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

19238.00

**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)

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| <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. 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

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 08 | / | 2011 |

Transaction ID : SB21B-169430-10000

Amount of Each Disbursement this Period

| |
|-------|
| 38.00 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Victoria Kempter

Mailing Address 2303 First Street NW

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 |
| 12 | / | 08 | / | 2011 |

Transaction ID : SB21B-169431

Amount of Each Disbursement this Period

| |
|------|
| 7.00 |
|------|

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
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 Y |
| 12 | / | 08 | / | 2011 |

Transaction ID : SB21B-169433

Amount of Each Disbursement this Period

| |
|---------|
| 3000.00 |
|---------|

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

| |
|---------|
| 3007.00 |
|---------|

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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Plus Three, LP

Mailing Address 2560 Rt 22 East
#266

City State Zip Code
Scotch Plains NJ 07076

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 Y
12 / 08 / 2011

Transaction ID : SB21B-169434

Amount of Each Disbursement this Period

11019.95

Full Name (Last, First, Middle Initial)

B. Production Solutions, Inc.

Mailing Address 1953 Gallows Road
Suite 600

City State Zip Code
Vienna VA 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

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB21B-169435

Amount of Each Disbursement this Period

1439.20

Full Name (Last, First, Middle Initial)

C. Brittany Ross

Mailing Address 2700 Belmont Rd, NW
Apt 105

City State Zip Code
Washington DC 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 Y
12 / 08 / 2011

Transaction ID : SB21B-169437

Amount of Each Disbursement this Period

183.41

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

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

12642.56

**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 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. SD&A Teleservices, Inc.

Mailing Address 5757 West Century Blvd
Ste 300

City Los Angeles State CA Zip Code 90045

Purpose of Disbursement
Phone Banks

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
12 / 08 / 2011

Transaction ID : SB21B-169439

Amount of Each Disbursement this Period

31.25

Full Name (Last, First, Middle Initial)

B. SD&A Teleservices, Inc.

Mailing Address 5757 West Century Blvd
Ste 300

City Los Angeles State CA Zip Code 90045

Purpose of Disbursement
Phone Banks

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
12 / 08 / 2011

Transaction ID : SB21B-169440

Amount of Each Disbursement this Period

3240.00

Full Name (Last, First, Middle Initial)

C. 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

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB21B-169441

Amount of Each Disbursement this Period

52.00

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

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

3323.25

**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)

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| <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. Melanie Smith

Mailing Address 49 Quincy Place, 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) ▼

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB21B-169442

Amount of Each Disbursement this Period

11.00

Full Name (Last, First, Middle Initial)

B. Staples Credit Plan

Mailing Address PO Box 689020

City Des moines State IA Zip Code 50368

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
12 / 08 / 2011

Transaction ID : SB21B-169444

Amount of Each Disbursement this Period

115.43

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) ▼

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB21B-169450

Amount of Each Disbursement this Period

47.89

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

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

174.32

**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
12 / 08 / 2011

Transaction ID : SB21B-169451

Amount of Each Disbursement this Period

571.04

Full Name (Last, First, Middle Initial)

B. Muthoni Wambu

Mailing Address 928 Stubblefield Lane

City Baltimore State MD Zip Code 21202

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
12 / 08 / 2011

Transaction ID : SB21B-169452

Amount of Each Disbursement this Period

60.26

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
12 / 08 / 2011

Transaction ID : SB21B-169453

Amount of Each Disbursement this Period

36.00

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

667.30

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. Winning Edge

Mailing Address PO Box 712

City Cardiff State CA Zip Code 92007

Purpose of Disbursement
Catering/Facilities

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB21B-169454

Amount of Each Disbursement this Period

326.50

B. ADP

Full Name (Last, First, Middle Initial)

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) ▼

Date of Disbursement

MM / DD / YYYY
12 / 09 / 2011

Transaction ID : SB21B-169894

Amount of Each Disbursement this Period

186.67

C. Discovery Benefits, Inc.

Full Name (Last, First, Middle Initial)

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
12 / 12 / 2011

Transaction ID : SB21B-169892

Amount of Each Disbursement this Period

2300.00

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

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

2813.17

**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. Blackbaud

Mailing Address PO Box 930256

City Atlanta State GA Zip Code 31193

Purpose of Disbursement
Computer Supplies/Hardware

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 13 / 2011

Transaction ID : SB21B-169887

Amount of Each Disbursement this Period

35150.00

Full Name (Last, First, Middle Initial)

B. Blackbaud

Mailing Address PO Box 930256

City Atlanta State GA Zip Code 31193

Purpose of Disbursement
Computer Supplies/Hardware

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 13 / 2011

Transaction ID : SB21B-169888

Amount of Each Disbursement this Period

175789.44

Full Name (Last, First, Middle Initial)

C. Blackbaud

Mailing Address PO Box 930256

City Atlanta State GA Zip Code 31193

Purpose of Disbursement
Computer Supplies/Hardware

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 13 / 2011

Transaction ID : SB21B-169889

Amount of Each Disbursement this Period

32654.00

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

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

243593.44

**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. Blackbaud

Mailing Address PO Box 930256

City Atlanta State GA Zip Code 31193

Purpose of Disbursement
Computer Supplies/Hardware

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 13 / 2011

Transaction ID : SB21B-169890

Amount of Each Disbursement this Period

36230.00

Full Name (Last, First, Middle Initial)

B. Kimberly Coleman

Mailing Address 2151 California Street NW
Apt 102

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
12 / 15 / 2011

Transaction ID : SB21B-170310

Amount of Each Disbursement this Period

1639.29

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) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-170311

Amount of Each Disbursement this Period

2330.53

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

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

40199.82

**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. 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

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-170312

Amount of Each Disbursement this Period

| |
|---------|
| 5104.18 |
|---------|

Full Name (Last, First, Middle Initial)

B. Lindsay Hicks

Mailing Address 2757 S Glebe Road
#410

City Arlington State VA Zip Code 22206

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-170313

Amount of Each Disbursement this Period

| |
|---------|
| 1074.25 |
|---------|

Full Name (Last, First, Middle Initial)

C. 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

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-170314

Amount of Each Disbursement this Period

| |
|---------|
| 1027.08 |
|---------|

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

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

| |
|---------|
| 7205.51 |
|---------|

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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. 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
12 / 15 / 2011

Transaction ID : SB21B-170315

Amount of Each Disbursement this Period

5291.95

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
12 / 15 / 2011

Transaction ID : SB21B-170316

Amount of Each Disbursement this Period

1344.40

Full Name (Last, First, Middle Initial)

C. 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
12 / 15 / 2011

Transaction ID : SB21B-170317

Amount of Each Disbursement this Period

2084.65

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

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

8721.00

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. Melanie Smith

Mailing Address 49 Quincy 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) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-170318

Amount of Each Disbursement this Period

1054.07

Full Name (Last, First, Middle Initial)

B. 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) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-170319

Amount of Each Disbursement this Period

1945.92

Full Name (Last, First, Middle Initial)

C. Emily L. Brown

Mailing Address 100 I 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
12 / 15 / 2011

Transaction ID : SB21B-170320

Amount of Each Disbursement this Period

1030.95

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

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

4030.94

**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 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 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 945 Route 35 | | Transaction ID : SB21B-170321 |
| City Cross River | State NY | |
| Zip Code 10518 | Purpose of Disbursement Salaries | Amount of Each Disbursement this Period 3162.18 |
| 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. Harmony Knutson | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 212 Ellsworth Street | | Transaction ID : SB21B-170322 |
| City Alexandria | State VA | |
| Zip Code 22314 | Purpose of Disbursement Salaries | Amount of Each Disbursement this Period 3479.98 |
| 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. Kali Murphy | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 461 N Thomas Street#407 | | Transaction ID : SB21B-170323 |
| City Arlington | State VA | |
| Zip Code 22203 | Purpose of Disbursement Salaries | Amount of Each Disbursement this Period 1037.45 |
| 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).....▶ | 7679.61 |
| 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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. 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) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-170324

Amount of Each Disbursement this Period

2763.32

Full Name (Last, First, Middle Initial)

B. Amalia Stott

Mailing Address 1790 Hopkins Ave

City Redwood City State CA Zip Code 94062

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
12 / 15 / 2011

Transaction ID : SB21B-170325

Amount of Each Disbursement this Period

2223.79

Full Name (Last, First, Middle Initial)

C. Marissa Strickfaden

Mailing Address 1100 First Street, SE #511

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
12 / 15 / 2011

Transaction ID : SB21B-170326

Amount of Each Disbursement this Period

1309.49

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

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

6296.60

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. Emilia Griswold

Mailing Address 2400 16th Street, NW
Apt 320

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
12 / 15 / 2011

Transaction ID : SB21B-170327

Amount of Each Disbursement this Period

1782.42

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
12 / 15 / 2011

Transaction ID : SB21B-170328

Amount of Each Disbursement this Period

2680.68

Full Name (Last, First, Middle Initial)

C. Hilary Nachem

Mailing Address 514 Second Street, SE
Apt 1

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
12 / 15 / 2011

Transaction ID : SB21B-170329

Amount of Each Disbursement this Period

1964.39

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

6427.49

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) ▼

Date of Disbursement

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|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-170330

Amount of Each Disbursement this Period

| |
|---------|
| 1021.05 |
|---------|

Full Name (Last, First, Middle Initial)

B. Catherine Loeffelman

Mailing Address 1111 25th Street, NW
Apt 520

City Washington State DC Zip Code 20037

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-170331

Amount of Each Disbursement this Period

| |
|---------|
| 2017.53 |
|---------|

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
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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-170332

Amount of Each Disbursement this Period

| |
|---------|
| 2304.21 |
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

| |
|---------|
| 5342.79 |
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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. Sarah Pierz

Mailing Address 1950 Sprucewood Ct

City Naperville State IL Zip Code 60565

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-170333

Amount of Each Disbursement this Period

| |
|--------|
| 719.45 |
|--------|

Full Name (Last, First, Middle Initial)

B. Emma Shapiro

Mailing Address 201 I Street NE
Apt 724

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 M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-170334

Amount of Each Disbursement this Period

| |
|---------|
| 1044.19 |
|---------|

Full Name (Last, First, Middle Initial)

C. 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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-170335

Amount of Each Disbursement this Period

| |
|---------|
| 1016.28 |
|---------|

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

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

| |
|---------|
| 2779.92 |
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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 109 Duncan St

City San Francisco State CA Zip Code 94110

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
12 / 15 / 2011

Transaction ID : SB21B-170336

Amount of Each Disbursement this Period

2296.15

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

M M / D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-170337

Amount of Each Disbursement this Period

2717.32

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

M M / D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-170338

Amount of Each Disbursement this Period

1947.37

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

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

6960.84

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. 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
12 / 15 / 2011

Transaction ID : SB21B-170339

Amount of Each Disbursement this Period

3870.21

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
12 / 15 / 2011

Transaction ID : SB21B-170340

Amount of Each Disbursement this Period

2379.61

Full Name (Last, First, Middle Initial)

C. Brittany Ross

Mailing Address 2700 Belmont Rd, NW
Apt 105

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
12 / 15 / 2011

Transaction ID : SB21B-170341

Amount of Each Disbursement this Period

2413.15

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

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

8662.97

**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
12 / 15 / 2011

Transaction ID : SB21B-170342

Amount of Each Disbursement this Period

994.27

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
12 / 15 / 2011

Transaction ID : SB21B-170343

Amount of Each Disbursement this Period

2942.93

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
12 / 15 / 2011

Transaction ID : SB21B-170344

Amount of Each Disbursement this Period

2690.84

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

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

6628.04

**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 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
12 / 15 / 2011

Transaction ID : SB21B-170345

Amount of Each Disbursement this Period

2909.18

Full Name (Last, First, Middle Initial)

B. Meredith Kormes

Mailing Address 4850 Connecticut Avenue NW
Apt 323

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
12 / 15 / 2011

Transaction ID : SB21B-170346

Amount of Each Disbursement this Period

2156.40

Full Name (Last, First, Middle Initial)

C. Victoria Kempter

Mailing Address 2303 First Street NW

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
12 / 15 / 2011

Transaction ID : SB21B-170381

Amount of Each Disbursement this Period

1007.72

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

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

6073.30

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| <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) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-170382

Amount of Each Disbursement this Period

2621.74

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) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-170383

Amount of Each Disbursement this Period

1639.74

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) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-170384

Amount of Each Disbursement this Period

3207.04

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

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

7468.52

**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"/> 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

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-170385

Amount of Each Disbursement this Period

1961.45

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

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-170386

Amount of Each Disbursement this Period

2434.14

Full Name (Last, First, Middle Initial)

C. 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
12 / 15 / 2011

Transaction ID : SB21B-170390

Amount of Each Disbursement this Period

2595.14

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

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

6990.73

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| <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
12 / 15 / 2011

Transaction ID : SB21B-170389

Amount of Each Disbursement this Period

0.12

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
12 / 15 / 2011

Transaction ID : SB21B-170308

Amount of Each Disbursement this Period

39976.72

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
12 / 15 / 2011

Transaction ID : SB21B-170309

Amount of Each Disbursement this Period

10450.75

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

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

50427.59

**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)

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| <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. Harmony Knutson

Mailing Address 212 Ellsworth Street

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
12 / 15 / 2011

Transaction ID : SB21B-169902

Amount of Each Disbursement this Period

831.43

Full Name (Last, First, Middle Initial)

B. Harmony Knutson

Mailing Address 212 Ellsworth Street

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
12 / 15 / 2011

Transaction ID : SB21B-169903

Amount of Each Disbursement this Period

3479.98

Full Name (Last, First, Middle Initial)

C. Emily Beardsley

Mailing Address 1776 Lanier Place NW #5C

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
12 / 15 / 2011

Transaction ID : SB21B-169906

Amount of Each Disbursement this Period

35.67

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

TOTAL This Period (last page this line number only)..... ▶

4347.08

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)

A. 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
12 / 15 / 2011

Transaction ID : SB21B-169907

Amount of Each Disbursement this Period

7987.50

Full Name (Last, First, Middle Initial)

B. Blackbaud

Mailing Address PO Box 930256

City Atlanta State GA Zip Code 31193

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
12 / 15 / 2011

Transaction ID : SB21B-169908

Amount of Each Disbursement this Period

938.26

Full Name (Last, First, Middle Initial)

C. Bully Pulpit Interactive, LLC

Mailing Address 1750 K St, NW
Suite 450

City Washington State DC Zip Code 20036

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
12 / 15 / 2011

Transaction ID : SB21B-169909

Amount of Each Disbursement this Period

3500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

12425.76

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| <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
12 / 15 / 2011

Transaction ID : SB21B-169910

Amount of Each Disbursement this Period

1732.33

Full Name (Last, First, Middle Initial)

B. 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) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-169911

Amount of Each Disbursement this Period

19855.38

Full Name (Last, First, Middle Initial)

C. Change.org

Mailing Address 139 Townsend St Suite 150

City San Francisco State CA Zip Code 94107

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
12 / 15 / 2011

Transaction ID : SB21B-169912

Amount of Each Disbursement this Period

14875.50

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

36463.21

**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"/> 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. Cogent Communications, Inc.

Mailing Address P.O. Box 791087

City Baltimore State MD Zip Code 21279-1087

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
12 / 15 / 2011

Transaction ID : SB21B-169913

Amount of Each Disbursement this Period

3427.75

Full Name (Last, First, Middle Initial)

B. 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) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-169914

Amount of Each Disbursement this Period

289.86

Full Name (Last, First, Middle Initial)

C. Ikon Financial Services

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) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-169915

Amount of Each Disbursement this Period

2000.22

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5717.83

**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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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
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
12 / 15 / 2011

Transaction ID : SB21B-169916

Amount of Each Disbursement this Period

28.00

Full Name (Last, First, Middle Initial)

B. The Mellman Group

Mailing Address 1023 31st Street NW
5th Floor

City Washington State DC Zip Code 20007

Purpose of Disbursement
Strategic Consulting

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
12 / 15 / 2011

Transaction ID : SB21B-169917

Amount of Each Disbursement this Period

18000.00

Full Name (Last, First, Middle Initial)

C. The Mellman Group

Mailing Address 1023 31st Street NW
5th Floor

City Washington State DC Zip Code 20007

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
12 / 15 / 2011

Transaction ID : SB21B-169918

Amount of Each Disbursement this Period

4433.20

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

22461.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| <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 Mellman Group

Mailing Address 1023 31st Street NW
5th Floor

City Washington State DC Zip Code 20007

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
12 / 15 / 2011

Transaction ID : SB21B-169919

Amount of Each Disbursement this Period

56.66

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
Postage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-169920

Amount of Each Disbursement this Period

96460.00

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
12 / 15 / 2011

Transaction ID : SB21B-169921

Amount of Each Disbursement this Period

5250.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

101766.66

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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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
Strategic Consulting

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
12 / 15 / 2011

Transaction ID : SB21B-169922

Amount of Each Disbursement this Period

10750.00

Full Name (Last, First, Middle Initial)

B. 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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169929

Amount of Each Disbursement this Period

12670.19

Full Name (Last, First, Middle Initial)

C. Pitney Bowes Global Financial Services LLC

Mailing Address PO Box 371887

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement
Equipment Rental

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
12 / 15 / 2011

Transaction ID : SB21B-169930

Amount of Each Disbursement this Period

225.07

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

23645.26

**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. Pollard & Associates, Inc.

Mailing Address One North Park Drive
Suite 104

City State Zip Code
Hunt Valley MD 21030-1816

Purpose of Disbursement
Accounting

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169931

Amount of Each Disbursement this Period

| |
|---------|
| 1368.75 |
|---------|

Full Name (Last, First, Middle Initial)

B. Kristen Schultz

Mailing Address 1209 Wells St

City State Zip Code
Ann Arbor MI 48104

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

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169937

Amount of Each Disbursement this Period

| |
|---------|
| 2100.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. SD&A Teleservices, Inc.

Mailing Address 5757 West Century Blvd
Ste 300

City State Zip Code
Los Angeles CA 90045

Purpose of Disbursement
Phone Banks

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169938

Amount of Each Disbursement this Period

| |
|--------|
| 345.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|---------|
| 3813.75 |
|---------|

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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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. SD&A Teleservices, Inc.

Mailing Address 5757 West Century Blvd
Ste 300

City Los Angeles State CA Zip Code 90045

Purpose of Disbursement
Phone Banks

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
12 / 15 / 2011

Transaction ID : SB21B-169939

Amount of Each Disbursement this Period

93.75

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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169941

Amount of Each Disbursement this Period

19.80

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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169942

Amount of Each Disbursement this Period

87.32

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

200.87

**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. 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

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169943

Amount of Each Disbursement this Period

| |
|--------|
| 192.86 |
|--------|

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
Database Software

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169944

Amount of Each Disbursement this Period

| |
|----------|
| 12500.00 |
|----------|

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) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169945

Amount of Each Disbursement this Period

| |
|-------|
| 39.00 |
|-------|

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|----------|
| 12731.86 |
|----------|

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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 State Zip Code
Ft. 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
12 / 15 / 2011

Transaction ID : SB21B-169945-10000

Amount of Each Disbursement this Period

39.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 360001

City State Zip Code
Fort Lauderdale FL 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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169946

Amount of Each Disbursement this Period

15.68

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. PHONE SVC

Mailing Address 11201 SE 8TH ST STE 200

City State Zip Code
Bellevue WA 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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169946-10000

Amount of Each Disbursement this Period

15.68

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

15.68

**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) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169947

Amount of Each Disbursement this Period

37.39

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. EXXONMOBIL

Mailing Address CUST SVC 1 800 243-9966

City LAUREL State MD Zip Code 64141

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
12 / 15 / 2011

Transaction ID : SB21B-169947-10000

Amount of Each Disbursement this Period

20.39

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PMI 1741 L ST.

Mailing Address 1741 L ST NW

City WASHINGTON State DC Zip Code 20036-5404

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
12 / 15 / 2011

Transaction ID : SB21B-169947-20000

Amount of Each Disbursement this Period

17.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

37.39

**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. American Express

Mailing Address Suite 0001

City Chicago State IL Zip Code 60679-0001

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169948

Amount of Each Disbursement this Period

| |
|--------|
| 930.23 |
|--------|

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. EXPEDIA*801514726827

Mailing Address 10190 COVINGTON CROSS DR

City Las Vegas State NV Zip Code 89144-7043

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169948-10000

Amount of Each Disbursement this Period

| |
|--------|
| 243.08 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. VIRGIN AMERICA ON BO

Mailing Address 555 AIRPORT BLVD FL 2ND

City BURLINGAME State CA Zip Code 94010-2000

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169948-20000

Amount of Each Disbursement this Period

| |
|------|
| 6.00 |
|------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 930.23 |
|--------|

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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. VIRGIN AMERICA ON BO

Mailing Address 555 AIRPORT BLVD FL 2ND

City BURLINGAME State CA Zip Code 94010-2000

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169948-30000

Amount of Each Disbursement this Period

| |
|-------|
| 12.00 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. VIRGIN AMERICA ON BO

Mailing Address 555 AIRPORT BLVD FL 2ND

City BURLINGAME State CA Zip Code 94010-2000

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169948-40000

Amount of Each Disbursement this Period

| |
|------|
| 6.00 |
|------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. VIRGIN AMERICA ON BO

Mailing Address 555 AIRPORT BLVD FL 2ND

City BURLINGAME State CA Zip Code 94010-2000

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169948-50000

Amount of Each Disbursement this Period

| |
|------|
| 7.00 |
|------|

[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. VIRGIN AMERICA ON BO

Mailing Address 555 AIRPORT BLVD FL 2ND

City BURLINGAME State CA Zip Code 94010-2000

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169948-60000

Amount of Each Disbursement this Period

| |
|-------|
| 12.00 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. IAD DULLES PAY AND G

Mailing Address 1 SAARINEN CIR

City DULLES State VA Zip Code 20166-7547

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169948-70000

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. NONNAS 1931122

Mailing Address 5300S HOWELL AVE

City MILWAKEE State WI Zip Code 53207

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169948-80000

Amount of Each Disbursement this Period

| |
|-------|
| 27.94 |
|-------|

[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. ALOFT MILWAUKEE DOWN | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1230 OLD WORLD THIRD ST | | Transaction ID : SB21B-169948-90000 |
| City MILWAUKEE State WI Zip Code 53212 | Amount of Each Disbursement this Period 46.00 | |
| Purpose of Disbursement Travel/Accommodation /Meals | Candidate Name | [MEMO ITEM] Memo Entry |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. AMPCO PARKING CATHED | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 555 E WELLS | | Transaction ID : SB21B-169948-10000 |
| City MILWAUKEE State WI Zip Code 53203 | Amount of Each Disbursement this Period 12.00 | |
| Purpose of Disbursement Travel/Accommodation /Meals | Candidate Name | [MEMO ITEM] Memo Entry |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. AVIS RENT A CAR | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address SEND ALL MAIL TO | | Transaction ID : SB21B-169948-110000 |
| City MILWAUKEE State WI Zip Code 11530 | Amount of Each Disbursement this Period 183.26 | |
| Purpose of Disbursement Travel/Accommodation /Meals | Candidate Name | [MEMO ITEM] Memo Entry |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President 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. HI HAT 2400000565180

Mailing Address 1701 N ARLINGTON PL

City State Zip Code
MILWAUKEE WI 53202-1618

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
12 / 15 / 2011

Transaction ID : SB21B-169948-120000

Amount of Each Disbursement this Period

34.32

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SPEEDWAY 04604 MIL 5

Mailing Address 500 SPEEDWAY DR

City State Zip Code
MILWAUKEE WI 45323

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
12 / 15 / 2011

Transaction ID : SB21B-169948-130000

Amount of Each Disbursement this Period

16.90

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. The Pfister F&B 1845

Mailing Address 424 E WISCONSIN AVE

City State Zip Code
Milwaukee WI 53202-4436

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
12 / 15 / 2011

Transaction ID : SB21B-169948-140000

Amount of Each Disbursement this Period

35.89

[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. COSTCO WHSE #0144 00

Mailing Address 450 10TH ST

City SAN FRANCISCO State CA Zip Code 94103-4304

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
12 / 15 / 2011

Transaction ID : SB21B-169948-150000

Amount of Each Disbursement this Period

188.52

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. JILLIAN'S 41

Mailing Address 101 4TH ST STE 170

City SAN FRANCISCO State CA Zip Code 94103-3003

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
12 / 15 / 2011

Transaction ID : SB21B-169948-160000

Amount of Each Disbursement this Period

49.32

[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
12 / 15 / 2011

Transaction ID : SB21B-169949

Amount of Each Disbursement this Period

5452.69

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

5452.69

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. GOGOAIR.COM

Mailing Address 303 S TECHNOLOGY CT

City Broomfield State IL Zip Code 80021

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
12 / 15 / 2011

Transaction ID : SB21B-169949-10000

Amount of Each Disbursement this Period

34.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DELTA ONBOARD ATLANT

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

M M / D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169949-20000

Amount of Each Disbursement this Period

6.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State US 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 / D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169949-30000

Amount of Each Disbursement this Period

35.00

[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. DELTA ONBOARD ATLANT

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

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169949-40000

Amount of Each Disbursement this Period

| |
|------|
| 5.50 |
|------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State US 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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169949-50000

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State US 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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169949-60000

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

[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. DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State US 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
12 / 15 / 2011

Transaction ID : SB21B-169949-70000

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BWI AIRPORT TAXI CAB

Mailing Address 3757 STEPPING STONE LN

City BURTONSVILLE State MD Zip Code 20866

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
12 / 15 / 2011

Transaction ID : SB21B-169949-80000

Amount of Each Disbursement this Period

85.40

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AVIS RENT A CAR

Mailing Address SEND ALL MAIL TO

City HELENA State MT 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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169949-90000

Amount of Each Disbursement this Period

320.39

[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. IHG HLEDTPMS

Mailing Address 22 N LAST CHANCE GULCH

City HELENA State MT Zip Code 59601-4122

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 |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |

Transaction ID : SB21B-169949-10000

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 2 | 2 | 7 | . | 3 | 6 |
|---|---|---|---|---|---|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BERT AND ERNIES 00-0

Mailing Address 361 N. LAST CHANCE GULCH

City HELENA State MT Zip Code 59601

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 |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |

Transaction ID : SB21B-169949-110000

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 2 | 5 | . | 0 | 0 |
|---|---|---|---|---|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. LUCCA'S 88430056446

Mailing Address 56 N LAST CHANCE GULCH

City HELENA State MT Zip Code 59601-4122

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 |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |

Transaction ID : SB21B-169949-120000

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 4 | 2 | . | 7 | 0 |
|---|---|---|---|---|

[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. THE BAGEL COMPANY 65

Mailing Address 735 N LAST CHANCE GULCH

City HELENA State MT Zip Code 59601

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 Y Y
12 / 15 / 2011

Transaction ID : SB21B-169949-130000

Amount of Each Disbursement this Period

28.25

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BENNYS BISTRO 884301

Mailing Address 108 E 6TH AVE

City HELENA State MT Zip Code 59601

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 Y Y
12 / 15 / 2011

Transaction ID : SB21B-169949-140000

Amount of Each Disbursement this Period

109.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CHEVRON CSI-097240/1

Mailing Address 2003 DIAMOND BLVD

City INGLEWOOD State CA Zip Code 94520

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 Y Y
12 / 15 / 2011

Transaction ID : SB21B-169949-150000

Amount of Each Disbursement this Period

10.56

[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. T2 STARBUCKS J431583

Mailing Address JFK INTERNATIONAL AIRPORT

City State Zip Code
JAMAICA NY 11430

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
12 / 15 / 2011

Transaction ID : SB21B-169949-160000

Amount of Each Disbursement this Period

12.24

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Yellow Cab of Howard

Mailing Address 7981 OLD JESSUP RD

City State Zip Code
Jessup MD 20794-3304

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
12 / 15 / 2011

Transaction ID : SB21B-169949-170000

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. KATANA 3000000045060

Mailing Address 8439 W SUNSET BLVD

City State Zip Code
LOS ANGELES CA 90069-1921

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
12 / 15 / 2011

Transaction ID : SB21B-169949-180000

Amount of Each Disbursement this Period

74.43

[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. KATANA 3000000045060 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 8439 W SUNSET BLVD | | Transaction ID : SB21B-169949-190000 |
| City LOS ANGELES | State CA | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 91.48 |
| 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. MARRIOTT LOS ANG D/T | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 333 S FIGUEROA STREET | | Transaction ID : SB21B-169949-200000 |
| City LOS ANGELES | State CA | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 186.60 |
| 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. SSP CREATIVE CROISSA | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 500 WORLD WAY TERM5 | | Transaction ID : SB21B-169949-210000 |
| City LOS ANGELS | State CA | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 18.02 |
| 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. SUBWAY 252353 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 624 E BROADWAY ST | | Transaction ID : SB21B-169949-220000 |
| City MISSOULA State MT Zip Code 59802-4612 | Purpose of Disbursement Travel/Accommodation /Meals | |
| Candidate Name | Category/Type | Amount of Each Disbursement this Period 5.70 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] Memo Entry |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. DELUXE RESTAURANT LL | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 729 SW 15TH AVE | | Transaction ID : SB21B-169949-230000 |
| City PORTLAND State OR Zip Code 97205-1906 | Purpose of Disbursement Travel/Accommodation /Meals | |
| Candidate Name | Category/Type | Amount of Each Disbursement this Period 41.30 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] Memo Entry |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. AVIS RENT A CAR | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address SEND ALL MAIL TO | | Transaction ID : SB21B-169949-240000 |
| City PORTLAND State OR Zip Code 11530 | Purpose of Disbursement Travel/Accommodation /Meals | |
| Candidate Name | Category/Type | Amount of Each Disbursement this Period 208.65 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. COURTYARD 26M

Mailing Address 550 SW OAK STREET

City PORTLAND State OR Zip Code 97204

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
12 / 15 / 2011

Transaction ID : SB21B-169949-250000

Amount of Each Disbursement this Period

840.54

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ROUGE PUB & GR068837

Mailing Address 7000 NE AIRPRT WAY MB#23

City PORTLAND State OR Zip Code 97218

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
12 / 15 / 2011

Transaction ID : SB21B-169949-260000

Amount of Each Disbursement this Period

19.33

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOPWORKS

Mailing Address 2944 SE POWELL BLVD

City PORTLAND State OR Zip Code 97202

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
12 / 15 / 2011

Transaction ID : SB21B-169949-270000

Amount of Each Disbursement this Period

15.75

[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. HUBERS CAFE

Mailing Address 411 SW 3RD AVE

City PORTLAND State OR Zip Code 97204-2601

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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169949-280000

Amount of Each Disbursement this Period

| |
|-------|
| 79.35 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS CORP004697

Mailing Address 555 SW OAK ST

City PORTLAND State OR Zip Code 97204-1752

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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169949-290000

Amount of Each Disbursement this Period

| |
|------|
| 4.35 |
|------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. 77 PORTLAND CITY GRI

Mailing Address 111 SW 5TH AVE FL 30

City PORTLAND State OR Zip Code 97204

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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169949-300000

Amount of Each Disbursement this Period

| |
|-------|
| 32.75 |
|-------|

[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. AVIS RENT A CAR

Mailing Address SEND ALL MAIL TO

City PORTLAND State OR 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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169949-310000

Amount of Each Disbursement this Period

106.01

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CAPERS CAFE LE BAR

Mailing Address 7000 NE AIRPORT WAY

City PORTLAND State OR Zip Code 97218

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
12 / 15 / 2011

Transaction ID : SB21B-169949-320000

Amount of Each Disbursement this Period

16.65

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. MARRIOTT 33709PTLNDO

Mailing Address 1401 SW NAITO PKWY

City PORTLAND State OR Zip Code 97201-5141

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
12 / 15 / 2011

Transaction ID : SB21B-169949-330000

Amount of Each Disbursement this Period

811.08

[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. HOPWORKS

Mailing Address 2944 SE POWELL BLVD

City PORTLAND State OR Zip Code 97202

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
12 / 15 / 2011

Transaction ID : SB21B-169949-340000

Amount of Each Disbursement this Period

66.55

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PADDY'S BAR & GRILL

Mailing Address 65 SW YAMHILL ST.

City PORTLAND State OR Zip Code 97204

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
12 / 15 / 2011

Transaction ID : SB21B-169949-350000

Amount of Each Disbursement this Period

11.25

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ANDINA RESTAURANT 50

Mailing Address 1314 NW GLISAN ST

City PORTLAND State OR Zip Code 97209-2783

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
12 / 15 / 2011

Transaction ID : SB21B-169949-360000

Amount of Each Disbursement this Period

85.00

[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. AVIS RENT A CAR | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address SEND ALL MAIL TO | | Transaction ID : SB21B-169949-370000 |
| City SAN DIEGO | State CA | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 383.29 |
| 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: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. HYATT RGCY MISSION B | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1441 QUIVIRA RD | | Transaction ID : SB21B-169949-380000 |
| City SAN DIEGO | State CA | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 221.31 |
| 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: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. FIESTA DE REYES 6500 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 2754 CALHOUN ST | | Transaction ID : SB21B-169949-390000 |
| City SAN DIEGO | State CA | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 60.53 |
| 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: _____ | |

| | |
|--|------|
| 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. HYATT HOTELS SAN DIE

Mailing Address 1 MARKET PL

City SAN DIEGO State CA Zip Code 92101-7714

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
12 / 15 / 2011

Transaction ID : SB21B-169949-400000

Amount of Each Disbursement this Period

16.36

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HYATT HOTELS SAN DIE

Mailing Address 1 MARKET PL

City SAN DIEGO State CA Zip Code 92101-7714

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
12 / 15 / 2011

Transaction ID : SB21B-169949-410000

Amount of Each Disbursement this Period

55.84

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. MARIA MARIA SAN DIEG

Mailing Address 1370 FRAZEE RD

City SAN DIEGO State CA Zip Code 92108

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
12 / 15 / 2011

Transaction ID : SB21B-169949-420000

Amount of Each Disbursement this Period

25.45

[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. UNIVERSITY CLUB ATOP

Mailing Address 750 B ST STE 3400

City State Zip Code
SAN DIEGO CA 92101-8130

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169949-430000

Amount of Each Disbursement this Period

| |
|-------|
| 58.02 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ALASKA AIRLINES INC.

Mailing Address 20833 INTERNATIONAL BLVD

City State Zip Code
SEATTLE WA 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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169949-440000

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AVIS RENT A CAR

Mailing Address SEND ALL MAIL TO

City State Zip Code
SEATTLE WA 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

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169949-450000

Amount of Each Disbursement this Period

| |
|--------|
| 190.06 |
|--------|

[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. 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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169949-460000

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. NT ROCK BOTTOM358701

Mailing Address 3412 CONCORD C

City ST. PAUL State MN Zip Code 55111

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169949-470000

Amount of Each Disbursement this Period

| |
|-------|
| 27.06 |
|-------|

[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 M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169949-480000

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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|------|
| 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

A. THE STANDARD 0095

Full Name (Last, First, Middle Initial)

Mailing Address 8300 W SUNSET BLVD

City WEST HOLLYWOOD State CA Zip Code 90069-1516

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169949-520000**

Amount of Each Disbursement this Period: 134.45

[MEMO ITEM]
Memo Entry

B. CAFE LA BOHEME

Full Name (Last, First, Middle Initial)

Mailing Address 8400 SANTA MONICA BLVD

City WEST HOLLYWOOD State CA Zip Code 90069-4296

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169949-530000**

Amount of Each Disbursement this Period: 44.18

[MEMO ITEM]
Memo Entry

C. EXXONMOBIL

Full Name (Last, First, Middle Initial)

Mailing Address CUST SVC 1 800 243-9966

City WEST HOLLYWOOD State CA Zip Code 64141

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169949-540000**

Amount of Each Disbursement this Period: 38.76

[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. THE STANDARD F&B 003

Mailing Address 8300 W SUNSET BLVD

City WEST HOLLYWOOD State CA Zip Code 90069-1516

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169949-550000

Amount of Each Disbursement this Period

| |
|-------|
| 43.62 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CLAFOUTIS 0500000994

Mailing Address 8630 W SUNSET BLVD

City WEST HOLLYWOOD State CA Zip Code 90069-2302

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169949-560000

Amount of Each Disbursement this Period

| |
|-------|
| 97.40 |
|-------|

[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
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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169950

Amount of Each Disbursement this Period

| |
|---------|
| 4021.95 |
|---------|

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|---------|
| 4021.95 |
|---------|

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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. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City Phoenix State AZ Zip Code 85034

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169950-10000

Amount of Each Disbursement this Period

| |
|--------|
| 361.40 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. NATIONAL CAR TOLLS*.

Mailing Address 11 GRACE AVE

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) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169950-20000

Amount of Each Disbursement this Period

| |
|------|
| 1.10 |
|------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State US Zip Code 30344

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169950-30000

Amount of Each Disbursement this Period

| |
|--------|
| 249.40 |
|--------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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|------|
| 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. DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State US 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
12 / 15 / 2011

Transaction ID : SB21B-169950-40000

Amount of Each Disbursement this Period

97.70

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HUDSON NEWSAMS BWI

Mailing Address BALTIMORE WA INTERNTL AIR

City BALTIMORE State MD Zip Code 21240

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
12 / 15 / 2011

Transaction ID : SB21B-169950-50000

Amount of Each Disbursement this Period

2.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CASEYS 016451

Mailing Address 216-218 KNOXVILLE ST

City BRIMFIELD State IL Zip Code 61517

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
12 / 15 / 2011

Transaction ID : SB21B-169950-60000

Amount of Each Disbursement this Period

2.44

[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. CASEYS 016451

Mailing Address 216-218 KNOXVILLE ST

City State Zip Code
BRIMFIELD IL 61517

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169950-70000

Amount of Each Disbursement this Period

| |
|-------|
| 67.99 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. O'Hare Hilton 28050

Mailing Address PO BOX 66414

City State Zip Code
Chicago IL 60666-0414

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169950-80000

Amount of Each Disbursement this Period

| |
|-------|
| 24.22 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. NATIONAL CAR RENTAL

Mailing Address 560 BESSIE COLEMAN DRIVE

City State Zip Code
CHICAGO IL 60666

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169950-90000

Amount of Each Disbursement this Period

| |
|--------|
| 942.09 |
|--------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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|------|
| 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. Hilton Hotel The Dra

Mailing Address 140 E WALTON PL

City Chicago State IL Zip Code 60611-1545

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
12 / 15 / 2011

Transaction ID : SB21B-169950-10000

Amount of Each Disbursement this Period

118.79

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS CORP025270

Mailing Address 1001A W MADISON ST

City CHICAGO State IL Zip Code 60607-2007

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
12 / 15 / 2011

Transaction ID : SB21B-169950-110000

Amount of Each Disbursement this Period

4.61

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS T2 B251690

Mailing Address 10000 WEST O HARE WAY

City CHICAGO State IL Zip Code 60666

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
12 / 15 / 2011

Transaction ID : SB21B-169950-120000

Amount of Each Disbursement this Period

6.11

[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. The Drake Food & Bev

Mailing Address 140 E WALTON PL

City Chicago State IL Zip Code 60611-1545

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169950-130000

Amount of Each Disbursement this Period

| |
|------|
| 9.83 |
|------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 7-ELEVEN 34463 00073

Mailing Address CITY PLACE CENTER EAST

City COLONA State IL Zip Code 75204

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169950-140000

Amount of Each Disbursement this Period

| |
|------|
| 3.20 |
|------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOTEL BLACKHAWK

Mailing Address 200 E 3RD STREET

City DAVENPORT State IA Zip Code 52801

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169950-150000

Amount of Each Disbursement this Period

| |
|-------|
| 58.58 |
|-------|

[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. HOTEL BLACKHAWK

Mailing Address 200 E 3RD STREET

City DAVENPORT State IA Zip Code 52801

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
12 / 15 / 2011

Transaction ID : SB21B-169950-160000

Amount of Each Disbursement this Period

2.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HOTEL BLACKHAWK

Mailing Address 200 E 3RD STREET

City DAVENPORT State IA Zip Code 52801

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
12 / 15 / 2011

Transaction ID : SB21B-169950-170000

Amount of Each Disbursement this Period

520.36

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOTEL BLACKHAWK

Mailing Address 200 E 3RD STREET

City DAVENPORT State IA Zip Code 52801

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
12 / 15 / 2011

Transaction ID : SB21B-169950-180000

Amount of Each Disbursement this Period

4.00

[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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 BLACKHAWK

Mailing Address 200 E 3RD STREET

City DAVENPORT State IA Zip Code 52801

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169950-190000

Amount of Each Disbursement this Period

| |
|--------|
| 517.09 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HUDSON NEWS OHARE JV

Mailing Address 1 MEADOWLANDS PLZ

City DES PLAINES State IL Zip Code 07073-2150

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169950-200000

Amount of Each Disbursement this Period

| |
|------|
| 6.63 |
|------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ROAD RANGER #265 000

Mailing Address 1801 SOUTH GALENA AVE

City DIXON State IL Zip Code 61021

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169950-210000

Amount of Each Disbursement this Period

| |
|-------|
| 17.59 |
|-------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

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| 0.00 |
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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. OLD TIME PALACE 6500

Mailing Address 703 15TH AVE

City EAST MOLINE State IL Zip Code 61244

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169950-220000

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 7-ELEVEN 34465 00073

Mailing Address CITY PLACE CENTER EAST

City EAST MOLINE State IL Zip Code 75204

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169950-230000

Amount of Each Disbursement this Period

| |
|-------|
| 10.89 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. OLD TIME PALACE 6500

Mailing Address 703 15TH AVE

City EAST MOLINE State IL Zip Code 61244

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169950-240000

Amount of Each Disbursement this Period

| |
|-------|
| 12.50 |
|-------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

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|------|
| 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. DOMINO'S 2744 000002 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 734 AVENUE OF THE CITIES | | Transaction ID : SB21B-169950-250000 |
| City EAST MOLINE State IL Zip Code 61244-4048 | Purpose of Disbursement Travel/Accommodation /Meals | |
| Candidate Name | Category/Type | Amount of Each Disbursement this Period 32.71 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] Memo Entry |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. JETBLUE BUY ON BOARD | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 6322 S 3000 E STE G10 | | Transaction ID : SB21B-169950-260000 |
| City FOREST HILLS State NY Zip Code 84121-6945 | Purpose of Disbursement Travel/Accommodation /Meals | |
| Candidate Name | Category/Type | Amount of Each Disbursement this Period 5.99 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] Memo Entry |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. MPC 57 10025740 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 420 S. KEELER | | Transaction ID : SB21B-169950-270000 |
| City GRANITE CITY State IL Zip Code 74004 | Purpose of Disbursement Travel/Accommodation /Meals | |
| Candidate Name | Category/Type | Amount of Each Disbursement this Period 49.79 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [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. WENDYS #8697 Q

Mailing Address 105 ARROWHEAD DR

City HAMPshire State IL Zip Code 60140-7657

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
12 / 15 / 2011

Transaction ID : SB21B-169950-280000

Amount of Each Disbursement this Period

5.98

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BUDGET RENT A CAR

Mailing Address 300 CENTRE POINTE DR

City HANOVER State MD Zip Code 23462-4415

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
12 / 15 / 2011

Transaction ID : SB21B-169950-290000

Amount of Each Disbursement this Period

351.56

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STEAK-N-SHAKE#0517 Q

Mailing Address 2901 WOODLAWN RD

City LINCOLN State IL Zip Code 62656-9633

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
12 / 15 / 2011

Transaction ID : SB21B-169950-300000

Amount of Each Disbursement this Period

8.56

[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. DUNKIN #347922 Q

Mailing Address 3501 AVE OF THE CITY

City Moline State IL Zip Code 61265

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
12 / 15 / 2011

Transaction ID : SB21B-169950-310000

Amount of Each Disbursement this Period

2.74

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. THE PARKING SPOT 34

Mailing Address 5500 HAZELTINE NATL DR

City Orlando State FL Zip Code 32812-9007

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
12 / 15 / 2011

Transaction ID : SB21B-169950-320000

Amount of Each Disbursement this Period

20.85

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. MCDONALD'S F8033 000

Mailing Address 1813 03TH ST

City Rock Island State IL Zip Code 61201

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
12 / 15 / 2011

Transaction ID : SB21B-169950-330000

Amount of Each Disbursement this Period

6.53

[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. PMI 1741 L ST.

Mailing Address 1741 L ST NW

City WASHINGTON State DC Zip Code 20036-5404

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
12 / 15 / 2011

Transaction ID : **SB21B-169950-340000**

Amount of Each Disbursement this Period: 9.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PMI 1741 L ST.

Mailing Address 1741 L ST NW

City WASHINGTON State DC Zip Code 20036-5404

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
12 / 15 / 2011

Transaction ID : **SB21B-169950-350000**

Amount of Each Disbursement this Period: 17.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS CORP072819

Mailing Address 1734 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) ▼

Date of Disbursement: MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB21B-169950-360000**

Amount of Each Disbursement this Period: 7.92

[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. PMI 1741 L ST.

Mailing Address 1741 L ST NW

City WASHINGTON State DC Zip Code 20036-5404

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169950-370000**

Amount of Each Disbursement this Period: 17.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
B. RUSTIK TAVERN 0267

Mailing Address 84 T ST NW

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: 12 / 15 / 2011

Transaction ID : **SB21B-169950-380000**

Amount of Each Disbursement this Period: 24.55

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
C. STARBUCKS CORP072819

Mailing Address 1734 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) ▼

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169950-390000**

Amount of Each Disbursement this Period: 9.24

[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. THE GROVE 1 AVIATION

Mailing Address WASHINGTON REAGAN INT AIR

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
12 / 15 / 2011

Transaction ID : SB21B-169950-400000

Amount of Each Disbursement this Period

4.01

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City WINSTON SALEM State NC Zip Code 85034

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
12 / 15 / 2011

Transaction ID : SB21B-169950-410000

Amount of Each Disbursement this Period

50.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City WINSTON SALEM State NC Zip Code 85034

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
12 / 15 / 2011

Transaction ID : SB21B-169950-420000

Amount of Each Disbursement this Period

150.00

[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. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City WINSTON SALEM State NC Zip Code 85034

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
12 / 15 / 2011

Transaction ID : SB21B-169950-430000

Amount of Each Disbursement this Period

47.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City WINSTON SALEM State NC Zip Code 85034

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
12 / 15 / 2011

Transaction ID : SB21B-169950-440000

Amount of Each Disbursement this Period

150.00

[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
Internet Services

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
12 / 15 / 2011

Transaction ID : SB21B-169952

Amount of Each Disbursement this Period

715.90

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

715.90

**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. 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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169952-10000

Amount of Each Disbursement this Period

350.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. NETWORK SOLUTIONS, L

Mailing Address 13861 SUNRISE VALLEY DR

City Herdon State VA Zip Code 20171-6124

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 Y
12 / 15 / 2011

Transaction ID : SB21B-169952-20000

Amount of Each Disbursement this Period

69.98

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. NETWORK SOLUTIONS, L

Mailing Address 13861 SUNRISE VALLEY DR

City Herdon State VA Zip Code 20171-6124

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 Y
12 / 15 / 2011

Transaction ID : SB21B-169952-30000

Amount of Each Disbursement this Period

295.92

[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. 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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169953

Amount of Each Disbursement this Period

1334.05

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
Local Transportation

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
12 / 15 / 2011

Transaction ID : SB21B-169953-10000

Amount of Each Disbursement this Period

60.00

[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
Local Transportation

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
12 / 15 / 2011

Transaction ID : SB21B-169953-20000

Amount of Each Disbursement this Period

331.50

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1334.05

**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. WMATA TREASURER SB

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

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
12 / 15 / 2011

Transaction ID : SB21B-169953-30000

Amount of Each Disbursement this Period

220.00

[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
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
12 / 15 / 2011

Transaction ID : SB21B-169953-40000

Amount of Each Disbursement this Period

168.00

[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
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
12 / 15 / 2011

Transaction ID : SB21B-169953-50000

Amount of Each Disbursement this Period

114.55

[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
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
12 / 15 / 2011

Transaction ID : SB21B-169953-60000

Amount of Each Disbursement this Period

40.00

[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
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
12 / 15 / 2011

Transaction ID : SB21B-169953-70000

Amount of Each Disbursement this Period

90.00

[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
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
12 / 15 / 2011

Transaction ID : SB21B-169953-80000

Amount of Each Disbursement this Period

60.00

[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. WMATA TREASURER SB

Mailing Address 600 5TH ST NW

City WASHINGTON State DC Zip Code 20001-2610

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
12 / 15 / 2011

Transaction ID : SB21B-169953-90000

Amount of Each Disbursement this Period

175.00

[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
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
12 / 15 / 2011

Transaction ID : SB21B-169953-10000

Amount of Each Disbursement this Period

75.00

[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
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
12 / 15 / 2011

Transaction ID : SB21B-169954

Amount of Each Disbursement this Period

1040.32

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1040.32

**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 INC. 00925

Mailing Address 500 STAPLES DR

City ROCHESTER State NY Zip Code 01702

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169954-10000

Amount of Each Disbursement this Period

| |
|--------|
| 741.95 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CHOPT

Mailing Address 1105 1/2 19TH ST NW

City WASHINGTON State DC Zip Code 20036-3601

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169954-20000

Amount of Each Disbursement this Period

| |
|--------|
| 101.31 |
|--------|

[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

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169954-30000

Amount of Each Disbursement this Period

| |
|--------|
| 161.38 |
|--------|

[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. CVS PHARMACY 6069 06 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1101 CONNECTICUT AVE NW | | Transaction ID : SB21B-169954-40000 |
| City WASHINGTON | State DC | |
| Zip Code 20036 | Purpose of Disbursement Office Supplies Expenses | Amount of Each Disbursement this Period 18.73 |
| 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. EFAX PLUS SERVICE | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 6922 HOLLYWOOD BLVD # 800 | | Transaction ID : SB21B-169954-50000 |
| City Los Angeles | State CA | |
| Zip Code 90028-6154 | Purpose of Disbursement Office Supplies Expenses | Amount of Each Disbursement this Period 16.95 |
| 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 12 / 15 / 2011 |
| Mailing Address Po Box 360001 | | Transaction ID : SB21B-169955 |
| City Ft. Lauderdale | State FL | |
| Zip Code 33336-0001 | Purpose of Disbursement Online Advertising | Amount of Each Disbursement this Period 9533.69 |
| 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).....▶ | 9533.69 |
| 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. FACEBOOK.COM*R6TF322

Mailing Address 1601 CALIFORNIA AVE

City WWW.FB.ME/CC State CA Zip Code 94304

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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169955-10000

Amount of Each Disbursement this Period

1666.62

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. FACEBOOK.COM*MDVF322

Mailing Address 1601 CALIFORNIA AVE

City WWW.FB.ME/CC State CA Zip Code 94304

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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169955-20000

Amount of Each Disbursement this Period

1321.16

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. FACEBOOK.COM*CCXF322

Mailing Address 1601 CALIFORNIA AVE

City WWW.FB.ME/CC State CA Zip Code 94304

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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169955-30000

Amount of Each Disbursement this Period

1081.98

[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. FACEBOOK.COM*P9ZF322

Mailing Address 1601 CALIFORNIA AVE

City State Zip Code
WWW.FB.ME/CC CA 94304

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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169955-40000

Amount of Each Disbursement this Period

1103.26

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. FACEBOOK.COM*HF3G322

Mailing Address 1601 CALIFORNIA AVE

City State Zip Code
WWW.FB.ME/CC CA 94304

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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169955-50000

Amount of Each Disbursement this Period

679.61

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. FACEBOOK.COM*TJ5G322

Mailing Address 1601 CALIFORNIA AVE

City State Zip Code
WWW.FB.ME/CC CA 94304

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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169955-60000

Amount of Each Disbursement this Period

165.70

[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. GOOGLE INC. C

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) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169955-70000

Amount of Each Disbursement this Period

| |
|--------|
| 390.51 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. FACEBOOK.COM*NT7G322

Mailing Address 1601 CALIFORNIA AVE

City WWW.FB.ME/CC State CA Zip Code 94304

Purpose of Disbursement
Online Advertising

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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169955-80000

Amount of Each Disbursement this Period

| |
|-------|
| 99.79 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. FACEBOOK.COM*94AG322

Mailing Address 1601 CALIFORNIA AVE

City WWW.FB.ME/CC State CA Zip Code 94304

Purpose of Disbursement
Online Advertising

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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169955-90000

Amount of Each Disbursement this Period

| |
|-------|
| 25.68 |
|-------|

[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. FACEBOOK.COM*J4CG322 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1601 CALIFORNIA AVE | | Transaction ID : SB21B-169955-10000 |
| City WWW.FB.ME/CC | State CA | |
| Purpose of Disbursement Online Advertising | Candidate Name | Amount of Each Disbursement this Period 32.40 |
| 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. FACEBOOK.COM*K3EG322 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1601 CALIFORNIA AVE | | Transaction ID : SB21B-169955-110000 |
| City WWW.FB.ME/CC | State CA | |
| Purpose of Disbursement Online Advertising | Candidate Name | Amount of Each Disbursement this Period 36.16 |
| 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. FACEBOOK.COM*ANSG322 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1601 CALIFORNIA AVE | | Transaction ID : SB21B-169955-120000 |
| City WWW.FB.ME/CC | State CA | |
| Purpose of Disbursement Online Advertising | Candidate Name | Amount of Each Disbursement this Period 62.79 |
| 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. FACEBOOK.COM*DRUG322 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1601 CALIFORNIA AVE | | Transaction ID : SB21B-169955-130000 |
| City WWW.FB.ME/CC | State CA | |
| Purpose of Disbursement Online Advertising | Candidate Name | Amount of Each Disbursement this Period 56.91 |
| 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. YAHOO SEARCH | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 3333 W EMPIRE AVE | | Transaction ID : SB21B-169955-140000 |
| City Burbank | State CA | |
| Purpose of Disbursement Online Advertising | 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) C. GOOGLE INC. C | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1600 AMPHITHEATRE PKWY | | Transaction ID : SB21B-169955-150000 |
| City Mountain View | State CA | |
| Purpose of Disbursement Online Advertising | Candidate Name | Amount of Each Disbursement this Period 530.34 |
| 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. FACEBOOK.COM*3Q2H322 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1601 CALIFORNIA AVE | | Transaction ID : SB21B-169955-160000 |
| City WWW.FB.ME/CC | State CA | |
| Purpose of Disbursement Online Advertising | Candidate Name | Amount of Each Disbursement this Period 51.13 |
| 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. TWITTERCOUNTER.COM | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address STATIONSPLEIN 57 | | Transaction ID : SB21B-169955-170000 |
| City AMSTERDAM | State | |
| Purpose of Disbursement Online Advertising | 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: | | |

| | | |
|---|----------------|--|
| Full Name (Last, First, Middle Initial) C. FACEBOOK.COM*6X6H322 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1601 CALIFORNIA AVE | | Transaction ID : SB21B-169955-180000 |
| City WWW.FB.ME/CC | State CA | |
| Purpose of Disbursement Online Advertising | Candidate Name | Amount of Each Disbursement this Period 125.00 |
| 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: | | |

| | |
|--|------|
| 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. FACEBOOK.COM*SC9H322

Mailing Address 1601 CALIFORNIA AVE

City WWW.FB.ME/CC State CA Zip Code 94304

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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169955-190000

Amount of Each Disbursement this Period

278.22

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. FACEBOOK.COM*TPBH322

Mailing Address 1601 CALIFORNIA AVE

City WWW.FB.ME/CC State CA Zip Code 94304

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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169955-200000

Amount of Each Disbursement this Period

280.07

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. FACEBOOK.COM*VRDH322

Mailing Address 1601 CALIFORNIA AVE

City WWW.FB.ME/CC State CA Zip Code 94304

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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169955-210000

Amount of Each Disbursement this Period

265.69

[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. FACEBOOK.COM*AQFH322

Mailing Address 1601 CALIFORNIA AVE

City State Zip Code
WWW.FB.ME/CC CA 94304

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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169955-220000

Amount of Each Disbursement this Period

271.61

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. FACEBOOK.COM*6WHH322

Mailing Address 1601 CALIFORNIA AVE

City State Zip Code
WWW.FB.ME/CC CA 94304

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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169955-230000

Amount of Each Disbursement this Period

301.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. FACEBOOK.COM*QZKH322

Mailing Address 1601 CALIFORNIA AVE

City State Zip Code
WWW.FB.ME/CC CA 94304

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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169955-240000

Amount of Each Disbursement this Period

192.26

[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
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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169956

Amount of Each Disbursement this Period

| |
|---------|
| 4347.06 |
|---------|

See Attached 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) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169956-10000

Amount of Each Disbursement this Period

| |
|---------|
| 4347.06 |
|---------|

[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) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169957

Amount of Each Disbursement this Period

| |
|---------|
| 3895.26 |
|---------|

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|---------|
| 8242.32 |
|---------|

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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. ATT CONS PHONE PMT

Mailing Address 211 S AKARD ST RM 1230

City Dallas State TX Zip Code 75202-4207

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
12 / 15 / 2011

Transaction ID : SB21B-169957-10000

Amount of Each Disbursement this Period

21.09

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 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

M M / D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169957-20000

Amount of Each Disbursement this Period

2397.86

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ATT BUS PHONE PMT

Mailing Address 211 S AKARD ST RM 1230

City Dallas State TX Zip Code 75202-4207

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
12 / 15 / 2011

Transaction ID : SB21B-169957-30000

Amount of Each Disbursement this Period

119.99

[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. ATTM*287022173021NBI | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 12525 CINGULAR WAY 3155H | | Transaction ID : SB21B-169957-40000 |
| City ALPHARETTA State GA Zip Code 30004 | Amount of Each Disbursement this Period 1356.32 | |
| Purpose of Disbursement Telephone Candidate Name | Category/Type | [MEMO ITEM] Memo Entry |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. American Express | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Po Box 360001 | | Transaction ID : SB21B-169958 |
| City Ft. Lauderdale State FL Zip Code 33336-0001 | Amount of Each Disbursement this Period 1685.60 | |
| Purpose of Disbursement Travel/Accommodation /Meals Candidate Name | Category/Type | See Attached Memo Entry |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Southwest Airlines (| | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address PO BOX 36611 | | Transaction ID : SB21B-169958-10000 |
| City DALLAS State TX Zip Code 75235 | Amount of Each Disbursement this Period 125.00 | |
| Purpose of Disbursement Travel/Accommodation /Meals Candidate Name | Category/Type | [MEMO ITEM] Memo Entry |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 1685.60 |
| 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. 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) ▼

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169958-20000**

Amount of Each Disbursement this Period: 50.00

[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) ▼

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169958-30000**

Amount of Each Disbursement this Period: 525.40

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
C. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169958-40000**

Amount of Each Disbursement this Period: 17.00

[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. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City Phoenix State AZ Zip Code 85034

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169958-50000

Amount of Each Disbursement this Period

| |
|--------|
| 377.90 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HOTELS.COM US

Mailing Address 333 108TH AVE NE

City Bellevue State WA Zip Code 98004

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169958-60000

Amount of Each Disbursement this Period

| |
|--------|
| 590.30 |
|--------|

[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

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169960

Amount of Each Disbursement this Period

| |
|---------|
| 5061.44 |
|---------|

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|---------|
| 5061.44 |
|---------|

| |
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| |
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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 1J28 09 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 3420 31ST ST | | Transaction ID : SB21B-169960-10000 |
| City ASTORIA | State NY | |
| Zip Code 11106-2302 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 49.44 |
| 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) B. NYC TAXI GROUP INC-1 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address NYC TAXI GROUP INC-1B71 1 | | Transaction ID : SB21B-169960-20000 |
| City BROOKLYN | State NY | |
| Zip Code 11218 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 37.10 |
| 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. CAPE AIR | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address BARNSTABLE MUNICIPAL AIRP | | Transaction ID : SB21B-169960-30000 |
| City CZRZ | State MA | |
| Zip Code 02601 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 179.00 |
| 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: | | |

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. CITY O CITY 65000000

Mailing Address 206 E 13TH AVE

City DENVER State CO Zip Code 80203

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
12 / 15 / 2011

Transaction ID : SB21B-169960-40000

Amount of Each Disbursement this Period

22.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. MAGNOLIA HOTEL DENVE

Mailing Address 818 17TH ST

City DENVER State CO Zip Code 80202-3101

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
12 / 15 / 2011

Transaction ID : SB21B-169960-50000

Amount of Each Disbursement this Period

242.90

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UNITED AIRLINES

Mailing Address 1200 E ALGONQUIN RD

City ELK GROVE State IL Zip Code 60007

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
12 / 15 / 2011

Transaction ID : SB21B-169960-60000

Amount of Each Disbursement this Period

29.00

[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. JETBLUE AIRWAYS

Mailing Address 6322 S 3000 E STE G10

City State Zip Code
JETBLUE NY 84121

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169960-70000

Amount of Each Disbursement this Period

| |
|--------|
| 775.30 |
|--------|

[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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169960-80000

Amount of Each Disbursement this Period

| |
|-------|
| 13.70 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. TRAVEL AGENCY SERVIC

Mailing Address 3000 WILSON BLVD

City State Zip Code
LOS ANGELES CA 22201

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169960-90000

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)..... ▶

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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 AIRLINES IN

Mailing Address AMERICAN AIRLINES-CCS

City LOS ANGELES State CA Zip Code 74133-1275

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169960-10000

Amount of Each Disbursement this Period

| |
|--------|
| 149.70 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. TRAVEL AGENCY SERVIC

Mailing Address 3000 WILSON BLVD

City LOS ANGELES State CA Zip Code 22201

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169960-110000

Amount of Each Disbursement this Period

| |
|-------|
| 40.00 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UNITED AIRLINES

Mailing Address 1200 E ALGONQUIN RD

City LOS ANGELES State CA Zip Code 60007

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169960-120000

Amount of Each Disbursement this Period

| |
|--------|
| 811.60 |
|--------|

[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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| |
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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. TRAVEL AGENCY SERVIC

Mailing Address 3000 WILSON BLVD

City LOS ANGELES State CA Zip Code 22201

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169960-130000

Amount of Each Disbursement this Period

| |
|-------|
| 40.00 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS, INC.

Mailing Address 4000 E. SKY HARBOR BLVD.

City LOS ANGELES State CA Zip Code 85034

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169960-140000

Amount of Each Disbursement this Period

| |
|--------|
| 393.40 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. TRAVEL AGENCY SERVIC

Mailing Address 3000 WILSON BLVD

City LOS ANGELES State CA Zip Code 22201

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169960-150000

Amount of Each Disbursement this Period

| |
|-------|
| 40.00 |
|-------|

[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. TRAVEL AGENCY SERVIC

Mailing Address 3000 WILSON BLVD

City LOS ANGELES State CA Zip Code 22201

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
12 / 15 / 2011

Transaction ID : SB21B-169960-160000

Amount of Each Disbursement this Period

40.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. TRAVEL AGENCY SERVIC

Mailing Address 3000 WILSON BLVD

City LOS ANGELES State CA Zip Code 22201

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
12 / 15 / 2011

Transaction ID : SB21B-169960-170000

Amount of Each Disbursement this Period

40.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UNITED AIRLINES

Mailing Address 1200 E ALGONQUIN RD

City LOS ANGELES State CA Zip Code 60007

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
12 / 15 / 2011

Transaction ID : SB21B-169960-180000

Amount of Each Disbursement this Period

404.70

[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. TRAVEL AGENCY SERVIC

Mailing Address 3000 WILSON BLVD

City LOS ANGELES State CA Zip Code 22201

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
12 / 15 / 2011

Transaction ID : SB21B-169960-190000

Amount of Each Disbursement this Period

40.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address 1200 E ALGONQUIN RD

City LOS ANGELES State CA Zip Code 60007

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
12 / 15 / 2011

Transaction ID : SB21B-169960-200000

Amount of Each Disbursement this Period

260.70

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. WELLINGTON HOTEL WEL

Mailing Address 871 7TH AVE FRNT 1

City NEW YORK State NY Zip Code 10019-3923

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
12 / 15 / 2011

Transaction ID : SB21B-169960-210000

Amount of Each Disbursement this Period

687.57

[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. W SAN DIEGO W SAN DI | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 421 WEST B ST | | Transaction ID : SB21B-169960-220000 |
| City SAN DIEGO | State CA | |
| Zip Code 92101 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 145.23 |
| 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. FRONTIER AIRLINES, I | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 7001 TOWER RD | | Transaction ID : SB21B-169960-230000 |
| City TULSA | State OK | |
| Zip Code 80249-7312 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 310.70 |
| 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. DCA REAGAN DCA REAGA | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address GARAGE A | | Transaction ID : SB21B-169960-240000 |
| City WASHINGTON | State DC | |
| Zip Code 20001 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 20.00 |
| 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: | | |

| | |
|--|------|
| 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. DCA REAGAN DCA REAGA

Mailing Address GARAGE 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
12 / 15 / 2011

Transaction ID : SB21B-169960-250000

Amount of Each Disbursement this Period

80.00

[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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169960-260000

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DCA REAGAN DCA REAGA

Mailing Address GARAGE 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
12 / 15 / 2011

Transaction ID : SB21B-169960-270000

Amount of Each Disbursement this Period

80.00

[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. TLF*NOSEGAY FLOWER S

Mailing Address 3737 NW 34TH STREET

City WASHINGTON State DC Zip Code 73112

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
12 / 15 / 2011

Transaction ID : SB21B-169960-280000

Amount of Each Disbursement this Period

68.90

[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
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
12 / 15 / 2011

Transaction ID : SB21B-169961

Amount of Each Disbursement this Period

2917.21

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. HOTELS.COM US

Mailing Address 333 108TH AVE NE

City Bellevue State WA Zip Code 98004

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
12 / 15 / 2011

Transaction ID : SB21B-169961-10000

Amount of Each Disbursement this Period

444.83

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2917.21

**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 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. NOAH'S BAGELS #2158

Mailing Address 11625 SW BVRTN HLLSDLE HW

City BEAVERTON State OR Zip Code 97005-2928

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
12 / 15 / 2011

Transaction ID : SB21B-169961-20000

Amount of Each Disbursement this Period

10.23

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. THE UPS STORE 859

Mailing Address 4130 SW 117TH AVE

City BEAVERTON State OR Zip Code 97005

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
12 / 15 / 2011

Transaction ID : SB21B-169961-30000

Amount of Each Disbursement this Period

13.33

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. FIVE GUYS #341 54292

Mailing Address 2606 SW CEDAR HILLS BLVD

City BEAVERTON State OR Zip Code 97005

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
12 / 15 / 2011

Transaction ID : SB21B-169961-40000

Amount of Each Disbursement this Period

9.57

[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. NOAH'S BAGELS #2158

Mailing Address 11625 SW BVRTN HLLSDLE HW

City BEAVERTON State OR Zip Code 97005-2928

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169961-50000

Amount of Each Disbursement this Period

| |
|------|
| 8.34 |
|------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SHELL OIL 5744314360

Mailing Address 12700 NORTHBOROUGH

City BEAVERTON State OR Zip Code 77067

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169961-60000

Amount of Each Disbursement this Period

| |
|------|
| 3.28 |
|------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CK5452BVRTON 1008085

Mailing Address SUITE 100

City BEAVERTON State OR Zip Code 94566

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169961-70000

Amount of Each Disbursement this Period

| |
|------|
| 3.63 |
|------|

[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

A. 7-ELEVEN 34135 00073

Full Name (Last, First, Middle Initial)

Mailing Address CITY PLACE CENTER EAST

City BEAVERTON State OR Zip Code 75204

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169961-80000**

Amount of Each Disbursement this Period: 4.66

[MEMO ITEM]
Memo Entry

B. BAJA FRESH BEAVERTON

Full Name (Last, First, Middle Initial)

Mailing Address 2625 SW CEDAR HILLS

City BEAVERTON State OR Zip Code 97005

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169961-90000**

Amount of Each Disbursement this Period: 8.48

[MEMO ITEM]
Memo Entry

C. TAQUERIA EL REY

Full Name (Last, First, Middle Initial)

Mailing Address 4547 RIVERSIDE DR.,

City CHINO State CA Zip Code 91710

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169961-100000**

Amount of Each Disbursement this Period: 8.93

[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. UNION 76 10071520 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 420 S. KEELER | | Transaction ID : SB21B-169961-110000 |
| City CHINO HILLS | State CA | |
| Zip Code 74004 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 6.32 |
| 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. VTS SAN FRANCISCO VT | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address VTS SAN FRANCISCO | | Transaction ID : SB21B-169961-120000 |
| City LONG ISLAND CITY | State NY | |
| Zip Code 11101-3502 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 42.95 |
| 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. CHEVRON CSI-091965/1 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 2003 DIAMOND BLVD | | Transaction ID : SB21B-169961-130000 |
| City LOS ANGELES | State CA | |
| Zip Code 94520 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 57.00 |
| 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: | | |

| | |
|--|------|
| 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. AMPCO SYSTEM-MARRIOT

Mailing Address 333 S FIGUEROA ST

City LOS ANGELES State CA Zip Code 90071-1001

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 Y Y
12 / 15 / 2011

Transaction ID : SB21B-169961-140000

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DELUXE RESTAURANT LL

Mailing Address 729 SW 15TH AVE

City PORTLAND State OR Zip Code 97205-1906

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 Y Y
12 / 15 / 2011

Transaction ID : SB21B-169961-150000

Amount of Each Disbursement this Period

42.25

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DELUXE RESTAURANT LL

Mailing Address 729 SW 15TH AVE

City PORTLAND State OR Zip Code 97205-1906

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 Y Y
12 / 15 / 2011

Transaction ID : SB21B-169961-160000

Amount of Each Disbursement this Period

40.30

[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. CHEVRON JONO, INC 00

Mailing Address 2003 DIAMOND BLVD

City PORTLAND State OR Zip Code 94520

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169961-170000

Amount of Each Disbursement this Period

| |
|-------|
| 54.58 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HERTZ CAR RENTAL

Mailing Address CREDIT BILLING BILLING

City PORTLAND State OR Zip Code 73134

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169961-180000

Amount of Each Disbursement this Period

| |
|--------|
| 271.46 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOTEL DELUXE HOTEL D

Mailing Address 729 SW 15TH AVE

City PORTLAND State OR Zip Code 97205

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169961-190000

Amount of Each Disbursement this Period

| |
|--------|
| 130.00 |
|--------|

[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. HOPWORKS

Mailing Address 2944 SE POWELL BLVD

City PORTLAND State OR Zip Code 97202

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
12 / 15 / 2011

Transaction ID : SB21B-169961-200000

Amount of Each Disbursement this Period

15.75

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 77 PORTLAND CITY GRI

Mailing Address 111 SW 5TH AVE FL 30

City PORTLAND State OR Zip Code 97204

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
12 / 15 / 2011

Transaction ID : SB21B-169961-210000

Amount of Each Disbursement this Period

32.75

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CHEVRON CARTER'S FOO

Mailing Address 6001 BOLLINGER CANYON RD

City PORTLAND State OR Zip Code 94583

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
12 / 15 / 2011

Transaction ID : SB21B-169961-220000

Amount of Each Disbursement this Period

2.88

[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. Hilton San Diego Res

Mailing Address 1775 E MISSION BAY DR

City San Diego State CA Zip Code 92109-6801

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
12 / 15 / 2011

Transaction ID : SB21B-169961-230000

Amount of Each Disbursement this Period

11.70

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Hilton San Diego Res

Mailing Address 1775 E MISSION BAY DR

City San Diego State CA Zip Code 92109-6801

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
12 / 15 / 2011

Transaction ID : SB21B-169961-240000

Amount of Each Disbursement this Period

438.68

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HERTZ CAR RENTAL

Mailing Address CREDIT BILLING BILLING

City SAN FRAN State CA Zip Code 73134

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
12 / 15 / 2011

Transaction ID : SB21B-169961-250000

Amount of Each Disbursement this Period

240.64

[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. SHELL OIL 5744421700 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 12700 NORTHBOROUGH | | Transaction ID : SB21B-169961-260000 |
| City SAN FRANCISCO | State CA | |
| Zip Code 77067 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 52.79 |
| 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. SAN FRANCISCO | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 207 LAWRENCE AVE | | Transaction ID : SB21B-169961-270000 |
| City SAN FRANCISCO | State CA | |
| Zip Code 94080-6818 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 6.24 |
| 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. SUPERETTE MARKET | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 128 EDDY ST | | Transaction ID : SB21B-169961-280000 |
| City SAN FRANCISCO | State CA | |
| Zip Code 94102 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 41.12 |
| 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. WALGREENS #890 00000

Mailing Address 135 POWELL ST

City State Zip Code
SAN FRANCISCO CA 94102-2203

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
12 / 15 / 2011

Transaction ID : SB21B-169961-290000

Amount of Each Disbursement this Period

5.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. COSTCO GAS #0429 000

Mailing Address 33961 DOHENY PARK ROAD

City State Zip Code
SAN JUAN CA 92675

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
12 / 15 / 2011

Transaction ID : SB21B-169961-300000

Amount of Each Disbursement this Period

60.01

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ALASKA AIR IN FLIGHT

Mailing Address 20833 INTERNATIONAL BLVD

City State Zip Code
SEATTLE WA 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

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-169961-310000

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. STARBUCKS CORP052324 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 8949 SANTA MONICA BLVD | | Transaction ID : SB21B-169961-320000 |
| City WEST HOLLYWOOD State CA Zip Code 90069-4912 | Amount of Each Disbursement this Period 11.70 | |
| Purpose of Disbursement Travel/Accommodation /Meals | 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: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. TRADER JOE'S #173 Q | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 8611 SANTA MONICA BLVD | | Transaction ID : SB21B-169961-330000 |
| City WEST HOLLYWOOD State CA Zip Code 90069 | Amount of Each Disbursement this Period 18.25 | |
| Purpose of Disbursement Travel/Accommodation /Meals | 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: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. CAFE LA BOHEME | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 8400 SANTA MONICA BLVD | | Transaction ID : SB21B-169961-340000 |
| City WEST HOLLYWOOD State CA Zip Code 90069-4296 | Amount of Each Disbursement this Period 46.18 | |
| Purpose of Disbursement Travel/Accommodation /Meals | 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: | |

| | |
|---|------|
| 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. THE STANDARD F&B 003

Mailing Address 8300 W SUNSET BLVD

City WEST HOLLYWOOD State CA Zip Code 90069-1516

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
12 / 15 / 2011

Transaction ID : SB21B-169961-350000

Amount of Each Disbursement this Period

42.62

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. LE PARC FRONT DESK 3

Mailing Address 733 N WEST KNOLL DR

City WEST HOLLYWOOD State CA Zip Code 90069-5207

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
12 / 15 / 2011

Transaction ID : SB21B-169961-360000

Amount of Each Disbursement this Period

703.56

[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
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
12 / 15 / 2011

Transaction ID : SB21B-169962

Amount of Each Disbursement this Period

73.18

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

73.18

**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. TLF*FLOWERS WORLD WI

Mailing Address 3737 NW 34TH STREET

City Oklahoma City State MD Zip Code 73112

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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169962-10000

Amount of Each Disbursement this Period

| |
|-------|
| 68.95 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CVS 2527 02527

Mailing Address 1025 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20036-5405

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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169962-20000

Amount of Each Disbursement this Period

| |
|------|
| 4.23 |
|------|

[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
Parking Fees

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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169963

Amount of Each Disbursement this Period

| |
|-------|
| 21.00 |
|-------|

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 21.00 |
|-------|

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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. COLONIAL PARKING #62

Mailing Address 1050 THOMAS JEFFRSN ST NW

City WASHINGTON State DC Zip Code 20007-3837

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
12 / 15 / 2011

Transaction ID : SB21B-169963-10000

Amount of Each Disbursement this Period

21.00

[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
Publication & Dues

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
12 / 15 / 2011

Transaction ID : SB21B-169964

Amount of Each Disbursement this Period

83.20

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. NEW YORK TIMES

Mailing Address 620 8TH AVE

City NEW YORK State NY Zip Code 10018-1618

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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169964-10000

Amount of Each Disbursement this Period

41.60

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

83.20

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. NEW YORK TIMES

Mailing Address 620 8TH AVE

City NEW YORK State NY Zip Code 10018-1618

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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169964-20000

Amount of Each Disbursement this Period

41.60

[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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169965

Amount of Each Disbursement this Period

2526.95

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. ALEXANDRIA YELLOW CA

Mailing Address 3014 COLVIN ST

City ALEXANDRIA State VA Zip Code 22314-4544

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
12 / 15 / 2011

Transaction ID : SB21B-169965-10000

Amount of Each Disbursement this Period

21.85

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2526.95

**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 US 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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169965-20000

Amount of Each Disbursement this Period

| |
|--------|
| 672.60 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State US 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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169965-30000

Amount of Each Disbursement this Period

| |
|--------|
| 380.70 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CRAIGIE ON MAIN 0050

Mailing Address 853 MAIN ST

City CAMBRIDGE State MA Zip Code 02139

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169965-40000

Amount of Each Disbursement this Period

| |
|--------|
| 224.41 |
|--------|

[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

A. CRAIGIE ON MAIN 0050

Full Name (Last, First, Middle Initial)

Mailing Address 853 MAIN ST

City CAMBRIDGE State MA Zip Code 02139

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169965-50000**

Amount of Each Disbursement this Period: 489.11

[MEMO ITEM]
Memo Entry

B. VIET ROYALE 00-08016

Full Name (Last, First, Middle Initial)

Mailing Address 6767 WILSON BLVD

City FALLS CHURCH State VA Zip Code 22044

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169965-60000**

Amount of Each Disbursement this Period: 34.50

[MEMO ITEM]
Memo Entry

C. BOS TAXI MED 1104 09

Full Name (Last, First, Middle Initial)

Mailing Address 4250 24TH ST

City LONG ISLAND C State NY Zip Code 11101-4608

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169965-70000**

Amount of Each Disbursement this Period: 12.80

[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. THUNDER GRILL #203 5

Mailing Address 50 MASSACHUSETTS AVE NE

City NEW YORK State NY Zip Code 20002-4214

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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169965-80000

Amount of Each Disbursement this Period

| |
|-------|
| 52.44 |
|-------|

[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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169965-90000

Amount of Each Disbursement this Period

| |
|--------|
| 179.88 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. STARBUCKS CORP076109

Mailing Address 237 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003-1107

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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169965-10000

Amount of Each Disbursement this Period

| |
|------|
| 8.53 |
|------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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| 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. MORTON'S OF CONNECTI | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1050 CONNECTICUT AVE NW | | Transaction ID : SB21B-169965-110000 |
| City WASHINGTON | State DC | |
| Zip Code 20036-5303 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 51.91 |
| 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. 1724 L ST AUBONPAIN | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1724 L ST NW | | Transaction ID : SB21B-169965-120000 |
| City WASHINGTON | State DC | |
| Zip Code 20036-5406 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 4.07 |
| 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. NOTTI | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 824 NEW HAMPSHIRE AVE NW | | Transaction ID : SB21B-169965-130000 |
| City WASHINGTON | State DC | |
| Zip Code 20037-2303 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 127.80 |
| 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. CASA NONNA CASA NONN

Mailing Address 1250 CONECTICUT AVE NW

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 Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169965-140000

Amount of Each Disbursement this Period

| |
|-------|
| 49.80 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. IHG WASHA401

Mailing Address 1401 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004-1047

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 Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169965-150000

Amount of Each Disbursement this Period

| |
|-------|
| 83.30 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. NOOSHI 0056

Mailing Address 1120 19TH ST NW FRNT 2

City WASHINGTON State DC Zip Code 20036-3686

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 Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169965-160000

Amount of Each Disbursement this Period

| |
|-------|
| 40.54 |
|-------|

[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. STARBUCKS CORP072819

Mailing Address 1734 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
12 / 15 / 2011

Transaction ID : SB21B-169965-170000

Amount of Each Disbursement this Period

3.91

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ST ARNOLDS 884300894

Mailing Address 1827 JEFFERSON PL NW

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
12 / 15 / 2011

Transaction ID : SB21B-169965-180000

Amount of Each Disbursement this Period

88.80

[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
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
12 / 15 / 2011

Transaction ID : SB21B-169966

Amount of Each Disbursement this Period

1469.70

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1469.70

**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. CATERING ELEPHANTS

Mailing Address 1611 SE 7TH AVE

City Portland State OR Zip Code 97214-3563

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
12 / 15 / 2011

Transaction ID : SB21B-169966-10000

Amount of Each Disbursement this Period

197.99

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CATERING ELEPHANTS

Mailing Address 1611 SE 7TH AVE

City Portland State OR Zip Code 97214-3563

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
12 / 15 / 2011

Transaction ID : SB21B-169966-20000

Amount of Each Disbursement this Period

207.11

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PARADISE BAKERY & CA

Mailing Address 1310 SW 3RD AVE

City PORTLAND State OR Zip Code 97201-5867

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
12 / 15 / 2011

Transaction ID : SB21B-169966-30000

Amount of Each Disbursement this Period

8.70

[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. MACKENZIE RIVER HELE | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1110 ROAD RUNNER ST | | Transaction ID : SB21B-169966-70000 |
| City HELENA | State MT | |
| Zip Code 59602-0519 | Purpose of Disbursement Catering/Facilities | Amount of Each Disbursement this Period 191.25 |
| 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: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. CHILI O`BRIENS CATER | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1410 BIRCH ST | | Transaction ID : SB21B-169966-80000 |
| City HELENA | State MT | |
| Zip Code 59601-0605 | Purpose of Disbursement Catering/Facilities | Amount of Each Disbursement this Period 232.88 |
| 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. EXPRESSLY GOURMET 00 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 6621 CONVOY COURT | | Transaction ID : SB21B-169966-90000 |
| City SAN DIEGO | State CA | |
| Zip Code 92111 | Purpose of Disbursement Catering/Facilities | Amount of Each Disbursement this Period 272.99 |
| 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. CABO CANTINA

Mailing Address 8301 W SUNSET BLVD

City WEST HOLLYWOOD State CA Zip Code 90069-1515

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 | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169966-10000

Amount of Each Disbursement this Period

| |
|--------|
| 108.89 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. KATANA 3000000045060

Mailing Address 8439 W SUNSET BLVD

City LOS ANGELES State CA Zip Code 90069-1921

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 | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169966-110000

Amount of Each Disbursement this Period

| |
|-------|
| 91.49 |
|-------|

[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
Internet Services

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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169967

Amount of Each Disbursement this Period

| |
|-------|
| 15.00 |
|-------|

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 15.00 |
|-------|

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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. AMPCO SYSTEM-MARRIOT

Mailing Address 333 S FIGUEROA ST

City LOS ANGELES State CA Zip Code 90071-1001

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 Y
12 / 15 / 2011

Transaction ID : SB21B-169967-10000

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 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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169968

Amount of Each Disbursement this Period

374.24

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. STAPLES 00218

Mailing Address 1250 H ST NW

City WASHINGTON State DC Zip Code 20005-3952

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
12 / 15 / 2011

Transaction ID : SB21B-169968-10000

Amount of Each Disbursement this Period

63.57

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

374.24

**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 20036-3506

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 Y Y
12 / 15 / 2011

Transaction ID : SB21B-169968-20000

Amount of Each Disbursement this Period

37.08

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. OFFICEMAX, INC. 0287

Mailing Address 7255 SW DARTMOUTH RD

City TIGARD State OR Zip Code 97223-8623

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 Y Y
12 / 15 / 2011

Transaction ID : SB21B-169968-30000

Amount of Each Disbursement this Period

22.58

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. OFFICEMAX, INC. 0287

Mailing Address 7255 SW DARTMOUTH RD

City TIGARD State OR Zip Code 97223-8623

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 Y Y
12 / 15 / 2011

Transaction ID : SB21B-169968-40000

Amount of Each Disbursement this Period

69.43

[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. MONTANA CVS PHARMACY

Mailing Address 3095 N. MONTANA AVENUE

City HELENA State MT Zip Code 59601

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169968-50000

Amount of Each Disbursement this Period

| |
|-------|
| 49.15 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STAPLES 00308

Mailing Address 2120 CAMINO DEL RIO N

City SAN DIEGO State CA Zip Code 92108-1509

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169968-60000

Amount of Each Disbursement this Period

| |
|-------|
| 25.38 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. TARGET 1410 1410

Mailing Address 1288 CAMINO DEL RIO N

City SAN DIEGO State CA Zip Code 92108-1511

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169968-70000

Amount of Each Disbursement this Period

| |
|-------|
| 16.82 |
|-------|

[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 UPS STORE 3939

Mailing Address 8033 W SUNSET BLVD

City State Zip Code
HOLLYWOOD CA 90046-2401

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
12 / 15 / 2011

Transaction ID : SB21B-169968-80000

Amount of Each Disbursement this Period

6.53

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. FEDEX OFFICE #5919 0

Mailing Address 7630 W SUNSET BLVD

City State Zip Code
LOS ANGELES CA 90046-2715

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
12 / 15 / 2011

Transaction ID : SB21B-169968-90000

Amount of Each Disbursement this Period

4.42

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. FEDEX OFFICE #5919 0

Mailing Address 7630 W SUNSET BLVD

City State Zip Code
LOS ANGELES CA 90046-2715

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
12 / 15 / 2011

Transaction ID : SB21B-169968-100000

Amount of Each Disbursement this Period

27.17

[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. STAPLES 01325

Mailing Address 4641 SANTA MONICA BLVD

City LOS ANGELES State CA Zip Code 90029-1803

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169968-110000

Amount of Each Disbursement this Period

| |
|-------|
| 52.11 |
|-------|

[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

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169969

Amount of Each Disbursement this Period

| |
|---------|
| 1992.35 |
|---------|

See Attached 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 M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169969-10000

Amount of Each Disbursement this Period

| |
|-------|
| 24.00 |
|-------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|---------|
| 1992.35 |
|---------|

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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

A. CHIPOTLE 0323 0094

Full Name (Last, First, Middle Initial)

Mailing Address 4300 WILSON BLVD

City ARLINGTON State VA Zip Code 22203-4167

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169969-20000**

Amount of Each Disbursement this Period: 14.06

[MEMO ITEM]
Memo Entry

B. AMTRAK

Full Name (Last, First, Middle Initial)

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) ▼

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169969-30000**

Amount of Each Disbursement this Period: 14.00

[MEMO ITEM]
Memo Entry

C. STARBUCKS CORP077594

Full Name (Last, First, Middle Initial)

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) ▼

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169969-40000**

Amount of Each Disbursement this Period: 4.35

[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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 CORP135939

Mailing Address **COURTEHOUSE PLAZA**

City **ARLINGTON** State **VA** Zip Code **22201**

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: **12 / 15 / 2011**

Transaction ID : SB21B-169969-50000

Amount of Each Disbursement this Period: **6.76**

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
B. N2 GREAT STEAK032601

Mailing Address **3400 SKY HARBOR BLVD**

City **PHOENIX** State **AZ** Zip Code **85034**

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: **12 / 15 / 2011**

Transaction ID : SB21B-169969-60000

Amount of Each Disbursement this Period: **6.87**

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
C. HOTEL COMPUTING SERV

Mailing Address **5721 SE COLUMBIA WAY**

City **VANCOUVER** State **WA** Zip Code **98661**

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: **12 / 15 / 2011**

Transaction ID : SB21B-169969-70000

Amount of Each Disbursement this Period: **8.53**

[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. PARADIES #3

Mailing Address NATIONAL AIRPORT

City WASHINGTON State DC Zip Code 20001-4901

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
12 / 15 / 2011

Transaction ID : SB21B-169969-80000

Amount of Each Disbursement this Period

10.49

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City WASHINGTON State DC Zip Code 85034

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
12 / 15 / 2011

Transaction ID : SB21B-169969-90000

Amount of Each Disbursement this Period

60.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ENTERPRISE RENTACAR

Mailing Address 9225 NE AIRPORT WAY

City PORTLAND State OR Zip Code 97220-4226

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
12 / 15 / 2011

Transaction ID : SB21B-169969-100000

Amount of Each Disbursement this Period

244.96

[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. RANCH 1 - VA 8843006 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1 AVIATION CIRCLE | | Transaction ID : SB21B-169969-110000 |
| City WASHINGTON | State DC | |
| Zip Code 20001 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 7.10 |
| 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. DELTA AIR LINES | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address ATLANTA AIRPORT | | Transaction ID : SB21B-169969-120000 |
| City ATLANTA | State US | |
| Zip Code 30344 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 25.00 |
| 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) C. DELTA AIR LINES | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address ATLANTA AIRPORT | | Transaction ID : SB21B-169969-130000 |
| City ATLANTA | State US | |
| Zip Code 30344 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 35.00 |
| 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: | | |

| | |
|--|------|
| 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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. MARRIOTT 33709PTLND0

Mailing Address 1401 SW NAITO PKWY

City PORTLAND State OR Zip Code 97201-5141

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
12 / 15 / 2011

Transaction ID : SB21B-169969-140000

Amount of Each Disbursement this Period

91.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ROUGE PUB & GR068837

Mailing Address 7000 NE AIRPRT WAY MB#23

City PORTLAND State OR Zip Code 97218

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
12 / 15 / 2011

Transaction ID : SB21B-169969-150000

Amount of Each Disbursement this Period

19.90

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. 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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169969-160000

Amount of Each Disbursement this Period

19.00

[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. A-1 RENTALS PARTY PL

Mailing Address 1400 CEDAR ST

City HELENA State MT Zip Code 59601-1019

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
12 / 15 / 2011

Transaction ID : SB21B-169969-170000

Amount of Each Disbursement this Period

45.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BENNYS BISTRO 884301

Mailing Address 108 E 6TH AVE

City HELENA State MT Zip Code 59601

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
12 / 15 / 2011

Transaction ID : SB21B-169969-180000

Amount of Each Disbursement this Period

114.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SILVER STAR STEAK CO

Mailing Address 833 GREAT NORTHERN BLVD

City HELENA State MT Zip Code 59601-3315

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
12 / 15 / 2011

Transaction ID : SB21B-169969-190000

Amount of Each Disbursement this Period

56.95

[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)

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| <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. LUCCA'S 88430056446

Mailing Address 56 N LAST CHANCE GULCH

City HELENA State MT Zip Code 59601-4122

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169969-230000

Amount of Each Disbursement this Period

| |
|-------|
| 41.70 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS CORP028787

Mailing Address 600 N LAST CHANCE GULCH S

City HELENA State MT Zip Code 59601-3347

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169969-240000

Amount of Each Disbursement this Period

| |
|------|
| 2.95 |
|------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State US 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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169969-250000

Amount of Each Disbursement this Period

| |
|-------|
| 60.00 |
|-------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

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| 0.00 |
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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. IHG HLEDTPMS

Mailing Address 22 N LAST CHANCE GULCH

City HELENA State MT Zip Code 59601-4122

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169969-260000

Amount of Each Disbursement this Period

| |
|-------|
| 13.45 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PARADIES SLC LLC Q

Mailing Address 776 NORTH TERMINAL DRIVE

City SALT LAKE CIT State UT Zip Code 84116

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169969-270000

Amount of Each Disbursement this Period

| |
|------|
| 6.90 |
|------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. COFFEE BEAN STORE 54

Mailing Address STE C

City SAN DIEGO State CA Zip Code 92108-3289

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169969-280000

Amount of Each Disbursement this Period

| |
|------|
| 4.20 |
|------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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| 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)

| | | | | | |
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| <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. WENDYS-MIDWAY #3005Q

Mailing Address 3760 MIDWAY DR

City State Zip Code
SAN DIEGO CA 92110-5203

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
12 / 15 / 2011

Transaction ID : SB21B-169969-290000

Amount of Each Disbursement this Period

7.31

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. CHILI'S GRILL#952

Mailing Address 3494 SPORTS ARENA BLVD

City State Zip Code
SAN DIEGO CA 92110-4929

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
12 / 15 / 2011

Transaction ID : SB21B-169969-300000

Amount of Each Disbursement this Period

20.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOTEL COMPUTING SERV

Mailing Address 5721 SE COLUMBIA WAY

City State Zip Code
VANCOUVER WA 98661

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
12 / 15 / 2011

Transaction ID : SB21B-169969-310000

Amount of Each Disbursement this Period

10.90

[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 |

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)
A. MARIA MARIA SAN DIEG

Date of Disbursement: MM / DD / YYYY
12 / 15 / 2011

Mailing Address 1370 FRAZEE RD

City SAN DIEGO State CA Zip Code 92108

Purpose of Disbursement: Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B-169969-320000**

Amount of Each Disbursement this Period: 18.26

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
B. MARIA MARIA SAN DIEG

Date of Disbursement: MM / DD / YYYY
12 / 15 / 2011

Mailing Address 1370 FRAZEE RD

City SAN DIEGO State CA Zip Code 92108

Purpose of Disbursement: Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B-169969-330000**

Amount of Each Disbursement this Period: 135.91

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
C. AMPCO SYSTEM-MARRIOT

Date of Disbursement: MM / DD / YYYY
12 / 15 / 2011

Mailing Address 333 S FIGUEROA ST

City LOS ANGELES State CA Zip Code 90071-1001

Purpose of Disbursement: Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B-169969-340000**

Amount of Each Disbursement this Period: 35.00

[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. MARRIOTT LOS ANG D/T | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 333 S FIGUEROA STREET | | Transaction ID : SB21B-169969-350000 |
| City LOS ANGELES | State CA | |
| Purpose of Disbursement Travel/Accommodation /Meals | Candidate Name | Amount of Each Disbursement this Period 54.68 |
| 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. ENTERPRISE RENT A CA | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address SAN DIEGO AP OFF SITE | | Transaction ID : SB21B-169969-360000 |
| City SAN DIEGO | State CA | |
| Purpose of Disbursement Travel/Accommodation /Meals | Candidate Name | Amount of Each Disbursement this Period 249.05 |
| 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. CLAFOUTIS 0500000994 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 8630 W SUNSET BLVD | | Transaction ID : SB21B-169969-370000 |
| City WEST HOLLYWOOD | State CA | |
| Purpose of Disbursement Travel/Accommodation /Meals | Candidate Name | Amount of Each Disbursement this Period 97.40 |
| 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. HYATT RGCY MISSION B

Mailing Address 1441 QUIVIRA RD

City SAN DIEGO State CA Zip Code 92109

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
12 / 15 / 2011

Transaction ID : **SB21B-169969-380000**

Amount of Each Disbursement this Period: 245.17

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
B. AMERICAN AIRLINES

Mailing Address AMERICAN AIRLINES-CCS

City LOS ANGELES State CA Zip Code 74133

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
12 / 15 / 2011

Transaction ID : **SB21B-169969-390000**

Amount of Each Disbursement this Period: 25.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
C. EL PASEO CAFE - TO 5

Mailing Address 380 WORLD WAY

City LOS ANGELES State CA Zip Code 90045-5800

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
12 / 15 / 2011

Transaction ID : **SB21B-169969-400000**

Amount of Each Disbursement this Period: 5.11

[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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 F15754 00

Mailing Address 380 WORLD WAY

City LOS ANGELES State CA Zip Code 90045-5800

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
12 / 15 / 2011

Transaction ID : SB21B-169969-410000

Amount of Each Disbursement this Period

2.49

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. MCDONALD'S F15754 00

Mailing Address 380 WORLD WAY

City LOS ANGELES State CA Zip Code 90045-5800

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
12 / 15 / 2011

Transaction ID : SB21B-169969-420000

Amount of Each Disbursement this Period

4.01

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. THE COUNTER

Mailing Address 5779 WILSHIRE BLVD

City LOS ANGELES State CA Zip Code 90036

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
12 / 15 / 2011

Transaction ID : SB21B-169969-430000

Amount of Each Disbursement this Period

18.45

[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. THE STANDARD 0095

Mailing Address 8300 W SUNSET BLVD

City WEST HOLLYWOOD State CA Zip Code 90069-1516

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
12 / 15 / 2011

Transaction ID : SB21B-169969-440000

Amount of Each Disbursement this Period

28.89

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DELTA AIR LINES

Mailing Address ATLANTA AIRPORT

City ATLANTA State US 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 / D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169969-450000

Amount of Each Disbursement this Period

25.00

[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
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 Y Y
12 / 15 / 2011

Transaction ID : SB21B-169973

Amount of Each Disbursement this Period

325.67

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

325.67

**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. UPS* 000000F2V361421

Mailing Address 1620 VALWOOD PKWY

City State Zip Code
Carrollton TX 75006-8321

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 M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169973-10000

Amount of Each Disbursement this Period

| |
|--------|
| 118.16 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UPS* 000000F2V361421

Mailing Address 1620 VALWOOD PKWY

City State Zip Code
Carrollton TX 75006-8321

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 M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169973-20000

Amount of Each Disbursement this Period

| |
|-------|
| 27.04 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. UPS* 000000F2V361421

Mailing Address 1620 VALWOOD PKWY

City State Zip Code
Carrollton TX 75006-8321

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 M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169973-30000

Amount of Each Disbursement this Period

| |
|--------|
| 103.27 |
|--------|

[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. UPS* 000000F2V361421 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1620 VALWOOD PKWY | | Transaction ID : SB21B-169973-40000 |
| City Carrollton | State TX | |
| Purpose of Disbursement Deliveries | | Amount of Each Disbursement this Period 9.86 |
| 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. UPS* 000000F2V361421 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1620 VALWOOD PKWY | | Transaction ID : SB21B-169973-50000 |
| City Carrollton | State TX | |
| Purpose of Disbursement Deliveries | | Amount of Each Disbursement this Period 67.34 |
| 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. American Express | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address P.O. Box 1270 | | Transaction ID : SB21B-169974 |
| City Newark | State NJ | |
| Purpose of Disbursement Office Supplies Expenses | | Amount of Each Disbursement this Period 338.56 |
| 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 |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 338.56 |
| |

**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 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. DLX FOR BUSINESS 000

Mailing Address 3680 VICTORIA ST N

City SHOREVIEW State MN Zip Code 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

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169974-10000

Amount of Each Disbursement this Period

| |
|--------|
| 338.56 |
|--------|

[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
Catering/Facilities

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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169975

Amount of Each Disbursement this Period

| |
|---------|
| 4798.32 |
|---------|

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. MARRIOTT MARRIOTT MA

Mailing Address 333 S FIGUEROA STREET

City LOS ANGELES State CA Zip Code 90071

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 | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169975-10000

Amount of Each Disbursement this Period

| |
|---------|
| 4798.32 |
|---------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|---------|
| 4798.32 |
|---------|

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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. 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

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169976

Amount of Each Disbursement this Period

| |
|-------|
| 16.00 |
|-------|

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. WALGREENS #13669 000

Mailing Address 776 MARKET ST

City SAN FRANCISCO State CA Zip Code 94102

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169976-10000

Amount of Each Disbursement this Period

| |
|------|
| 0.31 |
|------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. WALGREENS #13669 000

Mailing Address 776 MARKET ST

City SAN FRANCISCO State CA Zip Code 94102

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169976-20000

Amount of Each Disbursement this Period

| |
|-------|
| 12.43 |
|-------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 16.00 |
|-------|

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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

A. WALGREENS #13669 000

Full Name (Last, First, Middle Initial)

Mailing Address 776 MARKET ST

City SAN FRANCISCO State CA Zip Code 94102

Purpose of Disbursement Office Supplies Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169976-30000**

Amount of Each Disbursement this Period: 3.26

[MEMO ITEM]
Memo Entry

B. American Express

Full Name (Last, First, Middle Initial)

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169977**

Amount of Each Disbursement this Period: 10475.88

See Attached Memo Entry

C. VIRGIN AMERICA ON BO

Full Name (Last, First, Middle Initial)

Mailing Address 555 AIRPORT BLVD FL 2ND

City BURLINGAME State CA Zip Code 94010-2000

Purpose of Disbursement Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169977-10000**

Amount of Each Disbursement this Period: 7.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 10475.88

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. VIRGIN AMERICA ON BO

Mailing Address 555 AIRPORT BLVD FL 2ND

City BURLINGAME State CA Zip Code 94010-2000

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
12 / 15 / 2011

Transaction ID : SB21B-169977-20000

Amount of Each Disbursement this Period

8.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. YELLOW CARD SERVICES

Mailing Address 1200 MISSISSIPPI

City SAN FRANCISCO State CA Zip Code 94107

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
12 / 15 / 2011

Transaction ID : SB21B-169977-30000

Amount of Each Disbursement this Period

16.40

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. YELLOW CAB CO.OF DC

Mailing Address 1636 BLADENSBURG RD NE

City WASHINGTON 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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169977-40000

Amount of Each Disbursement this Period

67.00

[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. WASHINGTON FLYER TAX

Mailing Address 3251 WASHINGTON BLVD

City ARLINGTON State VA Zip Code 22201-4415

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
12 / 15 / 2011

Transaction ID : SB21B-169977-50000

Amount of Each Disbursement this Period

77.30

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. VTS SAN FRANCISCO VT

Mailing Address VTS SAN FRANCISCO

City LONG ISLAND CITY State NY Zip Code 11101-3502

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
12 / 15 / 2011

Transaction ID : SB21B-169977-60000

Amount of Each Disbursement this Period

44.20

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. LARK CREEK GRILL

Mailing Address DOMESTIC TERMINAL 2

City SAN FRANCISCO State CA Zip Code 94128

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
12 / 15 / 2011

Transaction ID : SB21B-169977-70000

Amount of Each Disbursement this Period

207.97

[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. LES JOULINS BISTRO 6

Mailing Address 44 ELLIS ST

City SAN FRANCISCO State CA Zip Code 94102-2208

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
12 / 15 / 2011

Transaction ID : SB21B-169977-80000

Amount of Each Disbursement this Period

74.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. PLN*PRICELINE.COM AI

Mailing Address 800 CONNECTICUT AVE

City NORWALK State CT Zip Code 06854

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
12 / 15 / 2011

Transaction ID : SB21B-169977-90000

Amount of Each Disbursement this Period

7.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. VIRGIN AMERICA ON BO

Mailing Address 555 AIRPORT BLVD FL 2ND

City BURLINGAME State CA Zip Code 94010-2000

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
12 / 15 / 2011

Transaction ID : SB21B-169977-100000

Amount of Each Disbursement this Period

7.50

[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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. VIRGIN AMERICA ON BO

Mailing Address 555 AIRPORT BLVD FL 2ND

City BURLINGAME State CA Zip Code 94010-2000

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169977-110000

Amount of Each Disbursement this Period

| |
|-------|
| 17.00 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 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

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169977-120000

Amount of Each Disbursement this Period

| |
|--------|
| 502.40 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS, INC.

Mailing Address 4000 E. SKY HARBOR BLVD.

City NORWALK State CT Zip Code 85034

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169977-130000

Amount of Each Disbursement this Period

| |
|--------|
| 559.80 |
|--------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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|------|
| 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. HOTELS.COM US

Mailing Address 333 108TH AVE NE

City Bellevue State WA Zip Code 98004

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169977-140000

Amount of Each Disbursement this Period

| |
|-------|
| 67.88 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HOTELS.COM US

Mailing Address 333 108TH AVE NE

City Bellevue State WA Zip Code 98004

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169977-150000

Amount of Each Disbursement this Period

| |
|--------|
| 393.43 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. PLN*PRICELINE.COM AI

Mailing Address 800 CONNECTICUT AVE

City NORWALK State CT Zip Code 06854

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169977-160000

Amount of Each Disbursement this Period

| |
|------|
| 7.00 |
|------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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| 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. DELTA AIR LINES INC. | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address ATLANTA AIRPORT | | Transaction ID : SB21B-169977-170000 |
| City NORWALK State CT Zip Code 30320 | Amount of Each Disbursement this Period 716.20 | |
| Purpose of Disbursement Travel/Accommodation /Meals | Category/ Type | [MEMO ITEM] Memo Entry |
| 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) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Southwest Airlines (| | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address PO BOX 36611 | | Transaction ID : SB21B-169977-180000 |
| City DALLAS State TX Zip Code 75235 | Amount of Each Disbursement this Period 245.20 | |
| Purpose of Disbursement Travel/Accommodation /Meals | Category/ Type | [MEMO ITEM] Memo Entry |
| 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) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. HOTELS.COM US | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 333 108TH AVE NE | | Transaction ID : SB21B-169977-190000 |
| City Bellevue State WA Zip Code 98004 | Amount of Each Disbursement this Period 759.84 | |
| Purpose of Disbursement Travel/Accommodation /Meals | Category/ Type | [MEMO ITEM] Memo Entry |
| 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) ▼ | |
| State: District: | | |

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. HYATT RGCY MISSION B

Mailing Address 1441 QUIVIRA RD

City State Zip Code
SAN DIEGO CA 92109

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169977-200000

Amount of Each Disbursement this Period

| |
|--------|
| 568.56 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ALASKA AIRLINES INC.

Mailing Address 20833 INTERNATIONAL BLVD

City State Zip Code
SEATTLE WA 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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169977-210000

Amount of Each Disbursement this Period

| |
|-------|
| 75.00 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ALASKA AIRLINES INC.

Mailing Address 20833 INTERNATIONAL BLVD

City State Zip Code
SEATTLE WA 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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169977-220000

Amount of Each Disbursement this Period

| |
|-------|
| 99.00 |
|-------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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|------|
| 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. MARRIOTT MARRIOTT MA

Mailing Address 333 S FIGUEROA STREET

City LOS ANGELES State CA Zip Code 90071

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
12 / 15 / 2011

Transaction ID : SB21B-169977-230000

Amount of Each Disbursement this Period

400.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. AMAZON.COM

Mailing Address 1516 2ND AVE FL 4

City SEATTLE State WA Zip Code 98101-1543

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
12 / 15 / 2011

Transaction ID : SB21B-169977-240000

Amount of Each Disbursement this Period

213.54

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS, INC.

Mailing Address 4000 E. SKY HARBOR BLVD.

City NORWALK State CT Zip Code 85034

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
12 / 15 / 2011

Transaction ID : SB21B-169977-250000

Amount of Each Disbursement this Period

575.30

[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. US AIRWAYS, INC.

Mailing Address 4000 E. SKY HARBOR BLVD.

City NORWALK State CT Zip Code 85034

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
12 / 15 / 2011

Transaction ID : SB21B-169977-260000

Amount of Each Disbursement this Period

575.30

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. EXPEDIA*140844012185

Mailing Address 10190 COVINGTON CROSS DR

City Las Vegas State NV Zip Code 89144-7043

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
12 / 15 / 2011

Transaction ID : SB21B-169977-270000

Amount of Each Disbursement this Period

262.78

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. US AIRWAYS, INC.

Mailing Address 4000 E. SKY HARBOR BLVD.

City ATLANTA State GA Zip Code 85034

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
12 / 15 / 2011

Transaction ID : SB21B-169977-280000

Amount of Each Disbursement this Period

99.40

[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. AMERICAN AIRLINES IN

Mailing Address AMERICAN AIRLINES-CCS

City MANKATO State MN Zip Code 74133-1275

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169977-290000

Amount of Each Disbursement this Period

| |
|--------|
| 197.90 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. San Francisco Hilton

Mailing Address 333 OFARRELL ST

City San Francisco State CA Zip Code 94102-2116

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169977-300000

Amount of Each Disbursement this Period

| |
|--------|
| 644.46 |
|--------|

[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 M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169977-310000

Amount of Each Disbursement this Period

| |
|--------|
| 332.00 |
|--------|

[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. HOTELS.COM US

Mailing Address 333 108TH AVE NE

City Bellevue State WA Zip Code 98004

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169977-320000

Amount of Each Disbursement this Period

| |
|--------|
| 674.64 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HOTELS.COM US

Mailing Address 333 108TH AVE NE

City Bellevue State WA Zip Code 98004

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169977-330000

Amount of Each Disbursement this Period

| |
|--------|
| 674.64 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HOTELS.COM US

Mailing Address 333 108TH AVE NE

City Bellevue State WA Zip Code 98004

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169977-340000

Amount of Each Disbursement this Period

| |
|--------|
| 674.64 |
|--------|

[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. AIRTRAN

Mailing Address 1800 PHOENIX BLVD STE 126

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

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169977-350000

Amount of Each Disbursement this Period

| |
|--------|
| 147.40 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 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

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169977-360000

Amount of Each Disbursement this Period

| |
|--------|
| 458.40 |
|--------|

[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 M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169977-370000

Amount of Each Disbursement this Period

| |
|-------|
| 17.00 |
|-------|

[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. American Express

Mailing Address PO Box 360001

City Fort Lauderdale State FL Zip Code 33336

Purpose of Disbursement
Office Supplies Credit

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-169978

Amount of Each Disbursement this Period

-184.45

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. CYCON OFFICE SYSTEMS

Mailing Address 76 APPAREL WAY

City SAN FRANCISCO State CA Zip Code 94124

Purpose of Disbursement
Office Supplies Credit

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-169978-10000

Amount of Each Disbursement this Period

-184.45

[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
Travel/Accommodation /Meals Credit

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-169979

Amount of Each Disbursement this Period

-113.17

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

-297.62

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 US

Mailing Address 333 108TH AVE NE

City Bellevue State WA Zip Code 98004

Purpose of Disbursement
Travel/Accommodation /Meals Credit

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169979-10000

Amount of Each Disbursement this Period

| |
|--------|
| -13.01 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. SUPERSHUTTLE EXECUCA

Mailing Address 54 TANFORAN AVE

City BURLINGAME State CA Zip Code 94080-6608

Purpose of Disbursement
Travel/Accommodation /Meals Credit

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169979-20000

Amount of Each Disbursement this Period

| |
|--------|
| -68.26 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. San Francisco Hilton

Mailing Address 333 OFARRELL ST

City San Francisco State CA Zip Code 94102-2116

Purpose of Disbursement
Travel/Accommodation /Meals Credit

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 |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB21B-169979-30000

Amount of Each Disbursement this Period

| |
|--------|
| -31.90 |
|--------|

[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. American Express

Mailing Address PO 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

M M / D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169980

Amount of Each Disbursement this Period

43.85

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. VZWRLSS-IVRVW 336707

Mailing Address 250 JAMES ST

City FOLSUM State CA Zip Code 07960-6410

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
12 / 15 / 2011

Transaction ID : SB21B-169980-10000

Amount of Each Disbursement this Period

43.85

[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 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
12 / 15 / 2011

Transaction ID : SB21B-169981

Amount of Each Disbursement this Period

1449.69

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1493.54

**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. ANNABELLE'S BAR & B

Mailing Address 68 4TH ST

City San Francisco State CA Zip Code 94103-3102

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169981-10000

Amount of Each Disbursement this Period

| |
|--------|
| 104.00 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. VIRGIN AMERICA ON BO

Mailing Address 555 AIRPORT BLVD FL 2ND

City BURLINGAME State CA Zip Code 94010-2000

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169981-20000

Amount of Each Disbursement this Period

| |
|------|
| 9.00 |
|------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. VIRGIN AMERICA ON BO

Mailing Address 555 AIRPORT BLVD FL 2ND

City BURLINGAME State CA Zip Code 94010-2000

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169981-30000

Amount of Each Disbursement this Period

| |
|------|
| 7.00 |
|------|

[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. OWENS MAIN STREET DE | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 912 S MAIN ST | | Transaction ID : SB21B-169981-40000 |
| City CHESHIRE | State CT | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 8.94 |
| 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: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. OWENS MAIN STREET DE | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 912 S MAIN ST | | Transaction ID : SB21B-169981-50000 |
| City CHESHIRE | State CT | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 11.44 |
| 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: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. MANNYS EXPRESS MANNY | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 5700 S CICERO AVE | | Transaction ID : SB21B-169981-60000 |
| City CHICAGO | State IL | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 6.98 |
| 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: _____ | |

| | |
|--|------|
| 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. EXXONMOBIL

Mailing Address CUST SVC 1 800 243-9966

City DELAFIELD State WI Zip Code 64141

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
12 / 15 / 2011

Transaction ID : SB21B-169981-70000

Amount of Each Disbursement this Period

23.47

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. HOLIDAY INN HOTEL AN

Mailing Address 200 W 1ST ST

City DULUTH State MN Zip Code 55802

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
12 / 15 / 2011

Transaction ID : SB21B-169981-80000

Amount of Each Disbursement this Period

75.04

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. SIR BENEDICTS 884300

Mailing Address 805 E SUPERIOR ST

City DULUTH State MN Zip Code 55802-2211

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
12 / 15 / 2011

Transaction ID : SB21B-169981-90000

Amount of Each Disbursement this Period

13.35

[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)

| | | | | | |
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| <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. HOLIDAY INN HOTEL AN

Mailing Address 200 W 1ST ST

City DULUTH State MN Zip Code 55802

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
12 / 15 / 2011

Transaction ID : SB21B-169981-10000

Amount of Each Disbursement this Period

404.76

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DULLES AIRPORT TAXI

Mailing Address 1115 W BROAD ST STE 1

City FALLS CHURCH State VA Zip Code 22046-2120

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
12 / 15 / 2011

Transaction ID : SB21B-169981-110000

Amount of Each Disbursement this Period

50.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ORBITZ.COM C

Mailing Address 500 W MADISON ST STE 100

City CHICAGO State IL Zip Code 60661-4544

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
12 / 15 / 2011

Transaction ID : SB21B-169981-120000

Amount of Each Disbursement this Period

417.09

[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)

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| <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 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) ▼

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169981-130000**

Amount of Each Disbursement this Period: 5.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
B. AVIS RENT A CAR

Mailing Address SEND ALL MAIL TO

City MILWAUKEE State WI 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: 12 / 15 / 2011

Transaction ID : **SB21B-169981-140000**

Amount of Each Disbursement this Period: 7.47

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
C. FAMOUS FAMIGLI603296

Mailing Address 5300 S HOWELL AVE

City MILWAUKEE State WI Zip Code 53207

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169981-150000**

Amount of Each Disbursement this Period: 8.15

[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)

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| <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. AVIS RENT A CAR

Mailing Address SEND ALL MAIL TO

City NEW HAVEN State CT 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

M M / D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169981-160000

Amount of Each Disbursement this Period

105.23

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. POWER GAS

Mailing Address 884 STATE ST

City NEW HAVEN State CT Zip Code 06511

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
12 / 15 / 2011

Transaction ID : SB21B-169981-170000

Amount of Each Disbursement this Period

10.22

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ANTON - FLETCH358750

Mailing Address 4300 GLUMACK DRIVE

City ST. PAUL State MN Zip Code 55111

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
12 / 15 / 2011

Transaction ID : SB21B-169981-180000

Amount of Each Disbursement this Period

15.39

[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)

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| <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. HHH OUTPOST 1 355574

Mailing Address 4300 GLUMACK DRIVE

City ST. PAUL State MN Zip Code 55111

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169981-190000

Amount of Each Disbursement this Period

| |
|------|
| 3.64 |
|------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. GLASS NICKEL PIZZA

Mailing Address 101 W MAIN ST

City SUN PRAIRIE State WI Zip Code 53590-2905

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169981-200000

Amount of Each Disbursement this Period

| |
|-------|
| 13.60 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. AMTRAK ACELA CAFE Q

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 M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169981-210000

Amount of Each Disbursement this Period

| |
|------|
| 6.00 |
|------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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|------|
| 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. AMTRAK ACELA CAFE Q

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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169981-220000

Amount of Each Disbursement this Period

| |
|-------|
| 16.00 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. FABULOUSLY FRESH 650

Mailing Address REAGAN NATIONAL AIRPORT T

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 | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169981-230000

Amount of Each Disbursement this Period

| |
|------|
| 2.56 |
|------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. 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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-169981-240000

Amount of Each Disbursement this Period

| |
|-------|
| 11.76 |
|-------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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| 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. SAMUEL ADAMS BRWHSE

Date of Disbursement: MM / DD / YYYY
12 / 15 / 2011

Mailing Address: RR WASH INTL ARPT TERM 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) ▼

Transaction ID : **SB21B-169981-250000**

Amount of Each Disbursement this Period: 13.42

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
B. HUDSON NEWS 310 WS

Date of Disbursement: MM / DD / YYYY
12 / 15 / 2011

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) ▼

Transaction ID : **SB21B-169981-260000**

Amount of Each Disbursement this Period: 12.96

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)
C. CORNER BAKERY

Date of Disbursement: MM / DD / YYYY
12 / 15 / 2011

Mailing Address: 50 MASSACHUSETTS AVE NE

City: WASHINGTON, D. 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) ▼

Transaction ID : **SB21B-169981-270000**

Amount of Each Disbursement this Period: 15.90

[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. COURTYARD 1ZY

Mailing Address 63 GRAND ST

City WATERBURY State CT Zip Code 06702-2224

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 |
| 1 | 2 | | 1 | 5 | | 2 | 0 | 1 | 1 |

Transaction ID : SB21B-169981-280000

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 3 | 7 | . | 7 | 4 |
|---|---|---|---|---|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DIORIOS RESTAURANT 0

Mailing Address 231 BANK ST

City WATERBURY State CT Zip Code 06702-2213

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 |
| 1 | 2 | | 1 | 5 | | 2 | 0 | 1 | 1 |

Transaction ID : SB21B-169981-290000

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 2 | 7 | . | 5 | 3 |
|---|---|---|---|---|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. ZACHARY'S PIZZA HOUS

Mailing Address 187 EAST MAIN ST

City WATERBURY State CT Zip Code 06702

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 |
| 1 | 2 | | 1 | 5 | | 2 | 0 | 1 | 1 |

Transaction ID : SB21B-169981-300000

Amount of Each Disbursement this Period

| | | | |
|---|---|---|---|
| 6 | . | 0 | 5 |
|---|---|---|---|

[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. 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) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169988

Amount of Each Disbursement this Period

| |
|------|
| 3.26 |
|------|

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. FEDEX OFFICE #2134 0

Mailing Address 1850 M STREET MW

City WASHINGTON State DC Zip Code 20002

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169988-10000

Amount of Each Disbursement this Period

| |
|------|
| 3.26 |
|------|

[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
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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169989

Amount of Each Disbursement this Period

| |
|--------|
| 125.31 |
|--------|

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 128.57 |
|--------|

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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. RED TOP CAB OF ARLIN

Mailing Address 1200 N HUDSON ST

City ARLINGTON State VA Zip Code 22201-5048

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
12 / 15 / 2011

Transaction ID : SB21B-169989-10000

Amount of Each Disbursement this Period

28.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DAILY GRILL WASHINGT

Mailing Address 1200 18TH ST NW FRNT 2

City WASHINGTON 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
12 / 15 / 2011

Transaction ID : SB21B-169989-20000

Amount of Each Disbursement this Period

96.81

[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
Equipment Maintenance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-169990

Amount of Each Disbursement this Period

274.54

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

274.54

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. MICROSOFT TECH SUPPO | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1 MICROSOFT WAY | | Transaction ID : SB21B-169990-10000 |
| City Redmond | State WA | |
| Purpose of Disbursement Equipment Maintenance | | Amount of Each Disbursement this Period 274.54 |
| 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 12 / 15 / 2011 |
| Mailing Address P.O. Box 1270 | | Transaction ID : SB21B-169991 |
| City Newark | State NJ | |
| Purpose of Disbursement Office Supplies Expenses | | Amount of Each Disbursement this Period 97.00 |
| 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. ROLANDS OF CHESAPEAK | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 7875 BAYSIDE RD | | Transaction ID : SB21B-169991-10000 |
| City CHESAPEAKE B | State MD | |
| Purpose of Disbursement Office Supplies Expenses | | Amount of Each Disbursement this Period 97.00 |
| 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).....▶ | 97.00 |
| 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. American Express

Mailing Address P.O Box 1270

City Newark State NJ Zip Code 07101-1270

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
12 / 15 / 2011

Transaction ID : SB21B-169992

Amount of Each Disbursement this Period

293.92

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. CHOPT

Mailing Address 1105 1/2 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
12 / 15 / 2011

Transaction ID : SB21B-169992-10000

Amount of Each Disbursement this Period

155.87

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CORNER BAKERY

Mailing Address 1828 L ST NW

City WASHINGTON State DC Zip Code 20036

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
12 / 15 / 2011

Transaction ID : SB21B-169992-20000

Amount of Each Disbursement this Period

66.33

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

293.92

**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 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. PANERA BREAD #601420

Mailing Address 1350 CONNECTICUT AVE

City WASHINGTON State DC Zip Code 20036

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
12 / 15 / 2011

Transaction ID : SB21B-169992-30000

Amount of Each Disbursement this Period

71.72

[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
Committee Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-169993

Amount of Each Disbursement this Period

100.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. A U OFFICE OF DEVELO

Mailing Address 4400 MASSACHUSETTS AVE NW

City WASHINGTON State DC Zip Code 20016-8002

Purpose of Disbursement
Committee Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-169993-10000

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

100.00

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)

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| <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 Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B-169994

Amount of Each Disbursement this Period

3.00

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. TTI TELEPHONE TECHNO

Mailing Address 891 AMSTERDAM AVE

City New York State NY Zip Code 10025

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
12 / 15 / 2011

Transaction ID : SB21B-169994-10000

Amount of Each Disbursement this Period

3.00

[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 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
12 / 15 / 2011

Transaction ID : SB21B-169995

Amount of Each Disbursement this Period

1137.26

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1140.26

**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. NYC TAXI MED 1W30 09 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 75 CANAL ST W | | Transaction ID : SB21B-169995-10000 |
| City BRONX | State NY | |
| Zip Code 10451-6417 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 38.16 |
| 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. IAD DULLES PAY AND G | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1 SAARINEN CIR | | Transaction ID : SB21B-169995-20000 |
| City DULLES | State VA | |
| Zip Code 20166-7547 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 40.00 |
| 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) C. VTS SAN FRANCISCO VT | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address VTS SAN FRANCISCO | | Transaction ID : SB21B-169995-30000 |
| City LONG ISLAND CITY | State NY | |
| Zip Code 11101-3502 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 56.75 |
| 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. TRAVEL AGENCY SERVIC

Mailing Address 3000 WILSON BLVD

City LOS ANGELES State CA Zip Code 22201

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169995-40000

Amount of Each Disbursement this Period

| |
|-------|
| 40.00 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. UNITED AIRLINES

Mailing Address 1200 E ALGONQUIN RD

City LOS ANGELES State CA Zip Code 60007

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169995-50000

Amount of Each Disbursement this Period

| |
|--------|
| 521.40 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. WELLINGTON HOTEL WEL

Mailing Address 871 7TH AVE FRNT 1

City NEW YORK State NY Zip Code 10019-3923

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169995-60000

Amount of Each Disbursement this Period

| |
|--------|
| 325.88 |
|--------|

[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. BOUDIN SFO # 413 007

Mailing Address SAN FRANCISCO INTL AIRPO

City SAN FRANCISCO State CA Zip Code 94128

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
12 / 15 / 2011

Transaction ID : SB21B-169995-70000

Amount of Each Disbursement this Period

11.80

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. FOUR SEASONS HOTELS

Mailing Address 757 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

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
12 / 15 / 2011

Transaction ID : SB21B-169995-80000

Amount of Each Disbursement this Period

31.04

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. BLUE MERMAID 0061

Mailing Address ACCOUNTING

City SAN FRANCISCO State CA Zip Code 94109

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
12 / 15 / 2011

Transaction ID : SB21B-169995-90000

Amount of Each Disbursement this Period

22.23

[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. SQ *MEDHANIE OGBE LI | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 901 MISSION ST #104 | | Transaction ID : SB21B-169995-100000 |
| City SF | State CA | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 96.30 |
| 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: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. American Express | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address P.O. BOX 360001 | | Transaction ID : SB21B-169996 |
| City Ft. Lauderdale | State FL | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 96.30 |
| 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: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. The Jefferson F&B 32 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1200 16TH ST NW | | Transaction ID : SB21B-169996-10000 |
| City Washington | State DC | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 96.30 |
| 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: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 96.30 |
| 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 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 Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169997

Amount of Each Disbursement this Period

| |
|--------|
| 143.18 |
|--------|

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

B. IHG RDUGSPMS

Mailing Address 3701 PHISDLEDOWN DR

City RALEIGH State NC Zip Code 27606

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169997-10000

Amount of Each Disbursement this Period

| |
|--------|
| 143.18 |
|--------|

[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) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-169998

Amount of Each Disbursement this Period

| |
|-------|
| 13.49 |
|-------|

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 156.67 |
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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. PAYPAL *SLIDEROLLCO

Mailing Address 2145 HAMILTON AVE

City San Jose State CA Zip Code 95125-5905

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 Y
12 / 15 / 2011

Transaction ID : SB21B-169998-10000

Amount of Each Disbursement this Period

7.50

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. 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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-169998-20000

Amount of Each Disbursement this Period

5.99

[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
Local Transportation

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
12 / 15 / 2011

Transaction ID : SB21B-169999

Amount of Each Disbursement this Period

5.00

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5.00

**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

A. SODA 800000042386001

Full Name (Last, First, Middle Initial)

Mailing Address 1265 LOGAN ST

City DENVER State CO Zip Code 80202

Purpose of Disbursement Local Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-169999-10000**

Amount of Each Disbursement this Period: 5.00

[MEMO ITEM]
Memo Entry

B. American Express

Full Name (Last, First, Middle Initial)

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-170000**

Amount of Each Disbursement this Period: 300.05

See Attached Memo Entry

C. COMCAST CABLE COMM

Full Name (Last, First, Middle Initial)

Mailing Address ATTN LORRAINE LUCERO

City Denver State CO Zip Code 80223-3624

Purpose of Disbursement Office Supplies Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 15 / 2011

Transaction ID : **SB21B-170000-10000**

Amount of Each Disbursement this Period: 93.10

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶ 300.05

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. STAPLES 01416

Mailing Address 870 COLORADO BLVD

City State Zip Code
GLENDALE CO 80246

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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-170000-20000

Amount of Each Disbursement this Period

| |
|--------|
| 206.95 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. 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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-170001

Amount of Each Disbursement this Period

| |
|---------|
| 1303.52 |
|---------|

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

C. REGENT THAI RESTAURA

Mailing Address 1910 18TH ST NW

City State Zip Code
Washington DC 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 |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB21B-170001-10000

Amount of Each Disbursement this Period

| |
|-------|
| 14.20 |
|-------|

[MEMO ITEM]
Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|---------|
| 1303.52 |
|---------|

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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. VERT KITCHEN LLC

Mailing Address 704 S PEARL ST

City State Zip Code
Denver CO 80209

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
12 / 15 / 2011

Transaction ID : SB21B-170001-20000

Amount of Each Disbursement this Period

22.54

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. BOINGO WIRELESS

Mailing Address 10960 WILSHIRE BLVD FL 8

City State Zip Code
Los Angeles CA 90024

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
12 / 15 / 2011

Transaction ID : SB21B-170001-30000

Amount of Each Disbursement this Period

9.95

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. RED TOP CAB OF ARLIN

Mailing Address 1200 N HUDSON ST

City State Zip Code
ARLINGTON VA 22201-5048

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
12 / 15 / 2011

Transaction ID : SB21B-170001-40000

Amount of Each Disbursement this Period

20.94

[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. DIA PARKING OPERATIO

Mailing Address 8500 PENA BLVD

City DENVER State CO Zip Code 80249-6205

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
12 / 15 / 2011

Transaction ID : SB21B-170001-50000

Amount of Each Disbursement this Period

96.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. DENVER AIRPORT ENTER

Mailing Address DENVER INTL AIRPORT

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

M M / D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-170001-60000

Amount of Each Disbursement this Period

25.28

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. VALERO 4093 00000000

Mailing Address 9830 COLONNADE BLVD

City DENVER State CO Zip Code 78230

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
12 / 15 / 2011

Transaction ID : SB21B-170001-70000

Amount of Each Disbursement this Period

56.31

[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. AMBASSADOR PARKING M | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1600 MARKET STEET | | Transaction ID : SB21B-170001-80000 |
| City DENVER | State CO | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 10.00 |
| 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: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. BONNIE BRAE CONOCO O | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 420 S. KEELER | | Transaction ID : SB21B-170001-90000 |
| City DENVER | State CO | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 63.72 |
| 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: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. DIA PARKING OPERATIO | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 8500 PENA BLVD | | Transaction ID : SB21B-170001-10000 |
| City DENVER | State CO | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 109.00 |
| 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: _____ | |

| | |
|--|------|
| 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. SHELL OIL 5744381140

Mailing Address 12700 NORTHBOROUGH

City ENGLEWOOD State CO Zip Code 77067

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-170001-110000

Amount of Each Disbursement this Period

| |
|-------|
| 53.32 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. ROTI MEDITERRANEAN G

Mailing Address 1629 K ST NW

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

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-170001-120000

Amount of Each Disbursement this Period

| |
|-------|
| 20.62 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. FAIRFAX EMBASSY ROW

Mailing Address 2100 MASSACHUSETTS AVE N

City WASHINGTON State DC Zip Code 20008

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 |
| 12 | | 15 | | 2011 |

Transaction ID : SB21B-170001-130000

Amount of Each Disbursement this Period

| |
|--------|
| 192.93 |
|--------|

[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. 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 M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-170001-140000

Amount of Each Disbursement this Period

8.82

[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 M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-170001-150000

Amount of Each Disbursement this Period

16.73

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. CARIBOU COFFEE#832 0

Mailing Address 1800 M ST

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

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-170001-160000

Amount of Each Disbursement this Period

2.41

[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. MORTON'S OF CONNECTI | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1050 CONNECTICUT AVE NW | | Transaction ID : SB21B-170001-170000 |
| City WASHINGTON | State DC | |
| Zip Code 20036-5303 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 51.82 |
| 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: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. CARIBOU COFFEE#832 0 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1800 M ST | | Transaction ID : SB21B-170001-180000 |
| City WASHINGTON | State DC | |
| Zip Code 20036 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 4.61 |
| 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. POSTO | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1515 14TH ST NW | | Transaction ID : SB21B-170001-190000 |
| City WASHINGTON | State DC | |
| Zip Code 20005-3780 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 113.70 |
| 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: | | |

| | |
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| 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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1724 L ST NW | | Transaction ID : SB21B-170001-200000 |
| City WASHINGTON | State DC | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 18.42 |
| 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: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. CARIBOU COFFEE#832 0 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1800 M ST | | Transaction ID : SB21B-170001-210000 |
| City WASHINGTON | State DC | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 6.80 |
| 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: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. CVS 1347 01347 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 6 DUPONT CIR NW | | Transaction ID : SB21B-170001-220000 |
| City WASHINGTON | State DC | |
| Purpose of Disbursement Travel/Accommodation /Meals | | Amount of Each Disbursement this Period 13.63 |
| 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: _____ | |

| | |
|--|------|
| 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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 BROS BAGELS

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
12 / 15 / 2011

Transaction ID : SB21B-170001-230000

Amount of Each Disbursement this Period

2.19

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. STARBUCKS CORP072819

Mailing Address 1734 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 M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-170001-240000

Amount of Each Disbursement this Period

5.56

[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) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B-170001-250000

Amount of Each Disbursement this Period

255.82

[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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1601 CONNECTICUT AVE NW | | Transaction ID : SB21B-170001-260000 |
| City WASHINGTON | State DC | |
| Zip Code 20009 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 101.51 |
| 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. CARIBOU COFFEE#832 0 | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 1800 M ST | | Transaction ID : SB21B-170001-270000 |
| City WASHINGTON | State DC | |
| Zip Code 20036 | Purpose of Disbursement Travel/Accommodation /Meals | Amount of Each Disbursement this Period 6.69 |
| 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. Jen Bluestein Lamb | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address 5617 N. 23rd Street | | Transaction ID : SB21B-170387 |
| City Arlington | State VA | |
| Zip Code 22205 | Purpose of Disbursement Salaries | Amount of Each Disbursement this Period 4226.99 |
| 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).....▶ | 4226.99 |
| 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 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) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 16 | / | 2011 |

Transaction ID : SB21B-170391

Amount of Each Disbursement this Period

| |
|----------|
| 10186.04 |
|----------|

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) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 16 | / | 2011 |

Transaction ID : SB21B-170637

Amount of Each Disbursement this Period

| |
|--------|
| 197.01 |
|--------|

Full Name (Last, First, Middle Initial)

C. Well & Lighthouse

Mailing Address 1244 19th St NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Strategic Consulting Credit

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 |
| 12 | / | 20 | / | 2011 |

Transaction ID : SB21B-170347

Amount of Each Disbursement this Period

| |
|----------|
| -5000.00 |
|----------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|---------|
| 5383.05 |
|---------|

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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. 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
12 / 20 / 2011

Transaction ID : SB21B-170348

Amount of Each Disbursement this Period

13596.00

Full Name (Last, First, Middle Initial)

B. 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
12 / 20 / 2011

Transaction ID : SB21B-170349

Amount of Each Disbursement this Period

74866.90

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
Postage

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 20 / 2011

Transaction ID : SB21B-170350

Amount of Each Disbursement this Period

29095.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

117557.90

**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
Postage

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 |
| 12 | | 20 | | 2011 |

Transaction ID : SB21B-170351

Amount of Each Disbursement this Period

| |
|----------|
| 12780.00 |
|----------|

Full Name (Last, First, Middle Initial)

B. Well & Lighthouse

Mailing Address 1244 19th St NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Strategic Consulting

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 |
| 12 | | 20 | | 2011 |

Transaction ID : SB21B-170352

Amount of Each Disbursement this Period

| |
|---------|
| 5000.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. Bully Pulpit Interactive, LLC

Mailing Address 1750 K St, NW
Suite 450

City Washington State DC Zip Code 20036

Purpose of Disbursement
Online Advertising

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 |
| 12 | | 21 | | 2011 |

Transaction ID : SB21B-170353

Amount of Each Disbursement this Period

| |
|---------|
| 3500.00 |
|---------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|----------|
| 21280.00 |
|----------|

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. 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
12 / 21 / 2011

Transaction ID : SB21B-170355

Amount of Each Disbursement this Period

274.37

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
12 / 21 / 2011

Transaction ID : SB21B-170356

Amount of Each Disbursement this Period

1371.87

Category/
Type

Full Name (Last, First, Middle Initial)

C. Beth Davidson

Mailing Address 40 East 80th St

City New York State NY Zip Code 10075

Purpose of Disbursement
Copy Writer

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 21 / 2011

Transaction ID : SB21B-170359

Amount of Each Disbursement this Period

1327.50

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2973.74

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) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 21 | | | 2011 | | | |

Transaction ID : SB21B-170361

Amount of Each Disbursement this Period

| |
|------|
| 8.61 |
|------|

Full Name (Last, First, Middle Initial)

B. 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) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 21 | | | 2011 | | | |

Transaction ID : SB21B-170362

Amount of Each Disbursement this Period

| |
|--------|
| 143.11 |
|--------|

Full Name (Last, First, Middle Initial)

C. 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) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 21 | | | 2011 | | | |

Transaction ID : SB21B-170363

Amount of Each Disbursement this Period

| |
|---------|
| 3113.19 |
|---------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|---------|
| 3264.91 |
|---------|

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. 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) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 21 / 2011

Transaction ID : SB21B-170364

Amount of Each Disbursement this Period

2570.29

Full Name (Last, First, Middle Initial)

B. KRW International, Inc.

Mailing Address 706 2nd Ave South
500 Baker Building

City Minneapolis State MN Zip Code 55402

Purpose of Disbursement
Strategic Consulting

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
12 / 21 / 2011

Transaction ID : SB21B-170365

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

C. KRW International, Inc.

Mailing Address 706 2nd Ave South
500 Baker Building

City Minneapolis State MN Zip Code 55402

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
12 / 21 / 2011

Transaction ID : SB21B-170366

Amount of Each Disbursement this Period

694.67

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

10764.96

**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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. PTI Communications

Mailing Address 1334-E Shepard Drive

City Sterling State VA Zip Code 20164-4426

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
12 / 21 / 2011

Transaction ID : SB21B-170369

Amount of Each Disbursement this Period

366.71

Full Name (Last, First, Middle Initial)

B. Red Top Cab

Mailing Address P.O. Box 100519

City Arlington State VA Zip Code 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

MM / DD / YYYY
12 / 21 / 2011

Transaction ID : SB21B-170370

Amount of Each Disbursement this Period

301.86

Full Name (Last, First, Middle Initial)

C. Red Top Cab

Mailing Address P.O. Box 100519

City Arlington State VA Zip Code 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

MM / DD / YYYY
12 / 21 / 2011

Transaction ID : SB21B-170371

Amount of Each Disbursement this Period

110.69

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

779.26

**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)

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| <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. Stephanie Schriock

Mailing Address 3225 Valley Drive

City Alexandria State VA Zip Code 22302

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
12 / 21 / 2011

Transaction ID : SB21B-170372

Amount of Each Disbursement this Period

245.63

Full Name (Last, First, Middle Initial)

B. Seventh Street Strategies

Mailing Address 5212 Farrington Road

City Bethesda State MD Zip Code 20816

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
12 / 21 / 2011

Transaction ID : SB21B-170373

Amount of Each Disbursement this Period

5000.00

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
12 / 21 / 2011

Transaction ID : SB21B-170376

Amount of Each Disbursement this Period

244.30

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5489.93

**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. Leigh Warren

Mailing Address 3109 Patrick Henry Drive
#623

City Falls Church State VA Zip Code 20444

Purpose of Disbursement
Parking Fees

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 |
| 12 | | | 21 | | | 2011 | | | |

Transaction ID : SB21B-170377

Amount of Each Disbursement this Period

| |
|-------|
| 48.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Well & Lighthouse

Mailing Address 1244 19th St NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Strategic Consulting

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 |
| 12 | | | 21 | | | 2011 | | | |

Transaction ID : SB21B-170378

Amount of Each Disbursement this Period

| |
|---------|
| 5000.00 |
|---------|

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
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 |
| 12 | | | 21 | | | 2011 | | | |

Transaction ID : SB21B-170380

Amount of Each Disbursement this Period

| |
|-------|
| 80.07 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|---------|
| 5128.07 |
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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

M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2011

Transaction ID : SB21B-170592

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

M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2011

Transaction ID : SB21B-170638

Amount of Each Disbursement this Period

386.37

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
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
12 / 27 / 2011

Transaction ID : SB21B-170388

Amount of Each Disbursement this Period

4888.65

See Attached Memo Entry

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5275.22

**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. Illikai Bar and rill

Mailing Address 1777 Ala Moana Boulevard

City Honolulu State HI Zip Code 96818

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 |
| 12 | | 27 | | 2011 |

Transaction ID : SB21B-170388-10000

Amount of Each Disbursement this Period

| |
|-------|
| 65.47 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Z Pizza

Mailing Address 1200 Ala Moana Blvd

City Honolulu State HI Zip Code 96818

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 |
| 12 | | 27 | | 2011 |

Transaction ID : SB21B-170388-20000

Amount of Each Disbursement this Period

| |
|------|
| 8.32 |
|------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Harbor Pub

Mailing Address 1765 Ala Moana Blvd

City Honolulu State HI Zip Code 96818

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 |
| 12 | | 27 | | 2011 |

Transaction ID : SB21B-170388-30000

Amount of Each Disbursement this Period

| |
|-------|
| 28.91 |
|-------|

[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)

| | | | | | |
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| <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 Modern Honolulu

Mailing Address 1775 Ala Moana Boulevard

City Honolulu State HI Zip Code 96818

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 |
| 12 | | 27 | | 2011 |

Transaction ID : SB21B-170388-50000

Amount of Each Disbursement this Period

| |
|--------|
| 812.73 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Ilikai Hotel

Mailing Address 1777 Ala Moana Boulevard

City Honolulu State HI Zip Code 96818

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 |
| 12 | | 27 | | 2011 |

Transaction ID : SB21B-170388-60000

Amount of Each Disbursement this Period

| |
|--------|
| 861.56 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Sansei Seafood

Mailing Address 2552 Kalakaua Avenue

City Honolulu State HI Zip Code 96815

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 |
| 12 | | 27 | | 2011 |

Transaction ID : SB21B-170388-80000

Amount of Each Disbursement this Period

| |
|-------|
| 40.00 |
|-------|

[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)

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| <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. Astra Limo

Mailing Address 4506 SE Anderegg Loop

City Portland State OR Zip Code 97326

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 |
| 12 | / | 27 | / | 2011 |

Transaction ID : SB21B-170388-90000

Amount of Each Disbursement this Period

| |
|--------|
| 342.00 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Bistro 921

Mailing Address 921 SW 6th Ave

City Portland State OR Zip Code 97204

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 |
| 12 | / | 27 | / | 2011 |

Transaction ID : SB21B-170388-140000

Amount of Each Disbursement this Period

| |
|-------|
| 44.00 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Hilton

Mailing Address 2465 Grant Rd

City Billings State MT Zip Code 59102

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 |
| 12 | / | 27 | / | 2011 |

Transaction ID : SB21B-170388-150000

Amount of Each Disbursement this Period

| |
|---------|
| 1124.12 |
|---------|

[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. Alaska Airlines

Mailing Address 7904 Northeast Airport Wa

City State Zip Code
Portland OR 97218

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 |
| 12 | / | 27 | / | 2011 |

Transaction ID : SB21B-170388-160000

Amount of Each Disbursement this Period

| |
|---------|
| 1110.61 |
|---------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Dos Machos

Mailing Address 980 S 24th St

City State Zip Code
Billings MT 59102

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 |
| 12 | / | 27 | / | 2011 |

Transaction ID : SB21B-170388-170000

Amount of Each Disbursement this Period

| |
|-------|
| 22.28 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. The Rex

Mailing Address 2401 Montana Avenue

City State Zip Code
Billings MT 59101

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 |
| 12 | / | 27 | / | 2011 |

Transaction ID : SB21B-170388-180000

Amount of Each Disbursement this Period

| |
|-------|
| 47.10 |
|-------|

[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. Downtown Conoco

Mailing Address 2701 6th Ave

City Billings State MT Zip Code 59102

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 |
| 12 | | 27 | | 2011 |

Transaction ID : SB21B-170388-190000

Amount of Each Disbursement this Period

| |
|--------|
| 117.12 |
|--------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Hampton Inn

Mailing Address 5110 Southgate Drive

City Billings State MT Zip Code 59101

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 |
| 12 | | 27 | | 2011 |

Transaction ID : SB21B-170388-210000

Amount of Each Disbursement this Period

| |
|-------|
| 96.29 |
|-------|

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. Standard Parking

Mailing Address Glacier Park Int'l Airport

City Kalispell State MT Zip Code 59901

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 |
| 12 | | 27 | | 2011 |

Transaction ID : SB21B-170388-240000

Amount of Each Disbursement this Period

| |
|-------|
| 82.00 |
|-------|

[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. Carpers Cafe

Mailing Address 7000 NE Airport Way

City Portland State OR Zip Code 97218

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 27 / 2011

Transaction ID : **SB21B-170388-250000**

Amount of Each Disbursement this Period: 14.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

B. Honolulu International Airport

Mailing Address 300 Rodgers Boulevard

City Honolulu State HI Zip Code 96819

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 27 / 2011

Transaction ID : **SB21B-170388-280000**

Amount of Each Disbursement this Period: 43.00

[MEMO ITEM]
Memo Entry

Full Name (Last, First, Middle Initial)

C. HMS Host

Mailing Address Seatac Int'l Airport
17801 International Blvd

City Seattle State WA Zip Code 98158

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 27 / 2011

Transaction ID : **SB21B-170388-300000**

Amount of Each Disbursement this Period: 29.14

[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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. 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

M M M / D D D / Y Y Y Y Y Y
12 / 29 / 2011

Transaction ID : SB21B-170759

Amount of Each Disbursement this Period

8000.00

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

M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2011

Transaction ID : SB21B-170639

Amount of Each Disbursement this Period

186.67

Full Name (Last, First, Middle Initial)

C. Kimberly Coleman

Mailing Address 2151 California Street NW
Apt 102

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 M / D D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : SB21B-170593

Amount of Each Disbursement this Period

1639.30

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

9825.97

**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) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2011

Transaction ID : SB21B-170594

Amount of Each Disbursement this Period

2330.53

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
12 / 31 / 2011

Transaction ID : SB21B-170595

Amount of Each Disbursement this Period

5104.18

Full Name (Last, First, Middle Initial)

C. Lindsay Hicks

Mailing Address 2757 S Glebe Road #410

City Arlington State VA Zip Code 22206

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
12 / 31 / 2011

Transaction ID : SB21B-170596

Amount of Each Disbursement this Period

1074.26

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8508.97

**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 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
Salaries

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2011

Transaction ID : SB21B-170597

Amount of Each Disbursement this Period

1027.13

Full Name (Last, First, Middle Initial)

B. 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
12 / 31 / 2011

Transaction ID : SB21B-170598

Amount of Each Disbursement this Period

5291.94

Full Name (Last, First, Middle Initial)

C. 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
12 / 31 / 2011

Transaction ID : SB21B-170599

Amount of Each Disbursement this Period

1344.38

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

7663.45

**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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 31 | / | 2011 |

Transaction ID : SB21B-170600

Amount of Each Disbursement this Period

| |
|---------|
| 2084.66 |
|---------|

Full Name (Last, First, Middle Initial)

B. Melanie Smith

Mailing Address 49 Quincy 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

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 31 | / | 2011 |

Transaction ID : SB21B-170601

Amount of Each Disbursement this Period

| |
|---------|
| 1054.07 |
|---------|

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 M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 31 | / | 2011 |

Transaction ID : SB21B-170602

Amount of Each Disbursement this Period

| |
|---------|
| 1945.92 |
|---------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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|---------|
| 5084.65 |
|---------|

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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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 L. Brown

Mailing Address 100 I 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
12 / 31 / 2011

Transaction ID : SB21B-170603

Amount of Each Disbursement this Period

1030.94

Full Name (Last, First, Middle Initial)

B. 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
12 / 31 / 2011

Transaction ID : SB21B-170604

Amount of Each Disbursement this Period

3162.18

Full Name (Last, First, Middle Initial)

C. Kali Murphy

Mailing Address 461 N Thomas Street#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) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2011

Transaction ID : SB21B-170605

Amount of Each Disbursement this Period

1037.44

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5230.56

**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 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. 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) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2011

Transaction ID : SB21B-170606

Amount of Each Disbursement this Period

2763.32

Full Name (Last, First, Middle Initial)

B. Amalia Stott

Mailing Address 1790 Hopkins Ave

City Redwood City State CA Zip Code 94062

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
12 / 31 / 2011

Transaction ID : SB21B-170607

Amount of Each Disbursement this Period

2223.79

Full Name (Last, First, Middle Initial)

C. Marissa Strickfaden

Mailing Address 1100 First Street, SE #511

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
12 / 31 / 2011

Transaction ID : SB21B-170608

Amount of Each Disbursement this Period

1309.49

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

6296.60

**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. Emilia Griswold

Mailing Address 2400 16th Street, NW
Apt 320

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
12 / 31 / 2011

Transaction ID : SB21B-170609

Amount of Each Disbursement this Period

1782.42

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
12 / 31 / 2011

Transaction ID : SB21B-170610

Amount of Each Disbursement this Period

2680.67

Full Name (Last, First, Middle Initial)

C. 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
12 / 31 / 2011

Transaction ID : SB21B-170611

Amount of Each Disbursement this Period

1021.06

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5484.15

**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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. Catherine Loeffelman

Mailing Address 1111 25th Street, NW
Apt 520

City Washington State DC Zip Code 20037

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
12 / 31 / 2011

Transaction ID : SB21B-170612

Amount of Each Disbursement this Period

2017.53

Category/
Type

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

MM / DD / YYYY
12 / 31 / 2011

Transaction ID : SB21B-170613

Amount of Each Disbursement this Period

2304.23

Category/
Type

Full Name (Last, First, Middle Initial)

C. Sarah Pierz

Mailing Address 1950 Sprucewood Ct

City Naperville State IL Zip Code 60565

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
12 / 31 / 2011

Transaction ID : SB21B-170614

Amount of Each Disbursement this Period

1070.73

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5392.49

**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. Emma Shapiro

Mailing Address 201 I Street NE
Apt 724

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
12 / 31 / 2011

Transaction ID : SB21B-170615

Amount of Each Disbursement this Period

1044.17

Full Name (Last, First, Middle Initial)

B. 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) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2011

Transaction ID : SB21B-170616

Amount of Each Disbursement this Period

1016.28

Full Name (Last, First, Middle Initial)

C. Emily Campbell

Mailing Address 109 Duncan St

City San Francisco State CA Zip Code 94110

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
12 / 31 / 2011

Transaction ID : SB21B-170617

Amount of Each Disbursement this Period

2296.15

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

4356.60

**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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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. 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
12 / 31 / 2011

Transaction ID : SB21B-170618

Amount of Each Disbursement this Period

2717.33

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) ▼

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2011

Transaction ID : SB21B-170619

Amount of Each Disbursement this Period

1947.37

Full Name (Last, First, Middle Initial)

C. 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
12 / 31 / 2011

Transaction ID : SB21B-170620

Amount of Each Disbursement this Period

3870.22

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8534.92

**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 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. 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) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2011

Transaction ID : SB21B-170621

Amount of Each Disbursement this Period

2379.61

Full Name (Last, First, Middle Initial)

B. Brittany Ross

Mailing Address 2700 Belmont Rd, NW
Apt 105

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
12 / 31 / 2011

Transaction ID : SB21B-170622

Amount of Each Disbursement this Period

2413.14

Full Name (Last, First, Middle Initial)

C. 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
12 / 31 / 2011

Transaction ID : SB21B-170623

Amount of Each Disbursement this Period

994.28

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5787.03

**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)

| | | | | | |
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| <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. 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
12 / 31 / 2011

Transaction ID : SB21B-170624

Amount of Each Disbursement this Period

2949.79

Full Name (Last, First, Middle Initial)

B. 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
12 / 31 / 2011

Transaction ID : SB21B-170625

Amount of Each Disbursement this Period

2690.85

Full Name (Last, First, Middle Initial)

C. 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
12 / 31 / 2011

Transaction ID : SB21B-170626

Amount of Each Disbursement this Period

2977.28

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

8617.92

**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 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. Meredith Kormes

Mailing Address 4850 Connecticut Avenue NW
Apt 323

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 M / D D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : SB21B-170627

Amount of Each Disbursement this Period

1,256.39

Full Name (Last, First, Middle Initial)

B. Victoria Kempter

Mailing Address 2303 First Street NW

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

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : SB21B-170760

Amount of Each Disbursement this Period

1007.72

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) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : SB21B-170629

Amount of Each Disbursement this Period

2644.63

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5808.74

**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"/> 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) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 31 | / | 2011 |

Transaction ID : SB21B-170630

Amount of Each Disbursement this Period

| |
|---------|
| 1639.75 |
|---------|

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) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 31 | / | 2011 |

Transaction ID : SB21B-170631

Amount of Each Disbursement this Period

| |
|---------|
| 3245.99 |
|---------|

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) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 31 | / | 2011 |

Transaction ID : SB21B-170632

Amount of Each Disbursement this Period

| |
|---------|
| 1961.46 |
|---------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|---------|
| 6847.20 |
|---------|

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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)

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|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
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| <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) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-170633

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 401 N Washington St
Suite 200

City State Zip Code
Rockville MD 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

/ /

Transaction ID : SB21B-170635

Amount of Each Disbursement this Period

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
Taxes - Payroll

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B-170636

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)

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| <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 Stock Transfer and Trust Company

Mailing Address 6201 15th Avenue

City Brooklyn State NY Zip Code 11219

Purpose of Disbursement
Void Check

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 |
| 12 | | | 31 | | | 2011 | | | |

Transaction ID : SB21B-170643

Amount of Each Disbursement this Period

| |
|--------|
| -40.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. 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

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 31 | | | 2011 | | | |

Transaction ID : SB21B-170634

Amount of Each Disbursement this Period

| |
|---------|
| 4226.99 |
|---------|

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| | | | | | | | | | |

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|---------|
| 4186.99 |
|---------|

| |
|------------|
| 1228596.04 |
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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)

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| <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. Tammy Baldwin for Senate

Mailing Address William Ryder
1508 China Grove Trail

City Tallahassee State FL Zip Code 32301

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168277

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Samuel Schiffman
2704 Carlaris Rd.

City San Marino State CA Zip Code 91108

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168278

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Betty Weaver
3859 Shagbark Ln

City Beavercreek State OH Zip Code 45440

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168279

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

400.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Marjon Riekerk
10051 Dibble Ave. NW

City Seattle State WA Zip Code 98177

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168280**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Beverly Lowe
1561 Porters Point Rd.

City Colchester State VT Zip Code 05446

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168281**

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address David Nolan
305 Elmont Avenue

City Folsom State PA Zip Code 19033

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168282**

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

60.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Frankie Tester
830 Logan Blvd S

City Naples State FL Zip Code 34119

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168283

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Jay Johnson
66 Ninth Avenue, Apt. 7W

City New York State NY Zip Code 10011

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168284

Amount of Each Disbursement this Period

83.35

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Phyllis Yarnold
2412 Yorktown St., Apt. 280

City Houston State TX Zip Code 77056

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168285

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

163.35

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Carol Payne
22 S Buchanan Ave Apt 209 Apt. 209

City Wenatchee State WA Zip Code 98801

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168286

Amount of Each Disbursement this Period

8.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Frank Gambetty
2323 7th St. SE, Apt. D205

City Puyallup State WA Zip Code 98374

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168287

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Carolyn Wiljanen
42 John Alden Road

City Plymouth State MA Zip Code 02360

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168288

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

33.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Elaine Orlando
11402 Kingstree Ct.

City Spring Hill State FL Zip Code 34609

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168289

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Carol Wiley
PO Box 542

City Durango State CO Zip Code 81302

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168290

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Audrey Foley
630 W Bonita Ave Apt 2M

City Claremont State CA Zip Code 91711

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168291

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

130.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Bernice Jasek
2505 Evergreen Rd. N

City Fargo State ND Zip Code 58102

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168292**

Amount of Each Disbursement this Period

10.00

B. Tammy Baldwin for Senate

Mailing Address Marita Maxey
1052 W Balmoral Ave., Apt. 2F

City Chicago State IL Zip Code 60640

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168293**

Amount of Each Disbursement this Period

35.00

C. Tammy Baldwin for Senate

Mailing Address Nancy Hendrickson
PO Box 21344

City Oxnard State CA Zip Code 93034

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168294**

Amount of Each Disbursement this Period

16.70

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

61.70

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Eva Griswold
12107 Gladewick Dr.

City Houston State TX Zip Code 77077

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-168295**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Micaela Reddy
6 Reservoir Pl

City Belleville State NJ Zip Code 07109

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-168296**

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Mary Harrington
1318 Pacific St.

City San Luis Obispo State CA Zip Code 93401

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-168297**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 65.00 |
|-------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Hilda Korner
255 South Rengstorff Avenue Apt. 1

City Mountain View State CA Zip Code 94040

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168301

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Lou Grogan
770 Shelter Bay dr.

City LaConner State WA Zip Code 98257

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168302

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 6 | 7 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Kathleen Brauge
PO Box 524

City Empire State CO Zip Code 80438

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168303

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 8 | 3 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 5 | 0 | 5 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 0 | 0 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address **Bettie Baker**
13802 Larchmere Blvd

City **Cleveland** State **OH** Zip Code **44120**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168304

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address **Celeste VanMyers**
PO Box 46126

City **Los Angeles** State **CA** Zip Code **90046**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168305

Amount of Each Disbursement this Period

| |
|-------|
| 60.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address **Owline Gregory**
73477 Feather Trail

City **Palm Desert** State **CA** Zip Code **92260**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168306

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 610.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Lillian Rubenstein
8508 Saint Louis Avenue

City Skokie State IL Zip Code 60076

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168307

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Anitta Cancell
236 Glen Avenue

City Millburn State NJ Zip Code 07041

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168308

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Kathleen Haydel
1696 Sandyrock Ln.

City San Jose State CA Zip Code 95125

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168309

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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| 130.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address **Bruce Hellmer**
308 Pineknoll Ct

City **Brighton** State **MI** Zip Code **48116**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168310

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address **Sarah Paulson**
1208 Ferdon Rd

City **Ann Arbor** State **MI** Zip Code **48104**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168311

Amount of Each Disbursement this Period

| |
|-------|
| 66.70 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address **Barbara Rorinson**
3480 Mountain View Ave

City **Carmel** State **CA** Zip Code **93923**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168312

Amount of Each Disbursement this Period

| |
|-------|
| 16.66 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
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| 108.36 |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Susan Dreghorn
724 Arlington Ave.

City Naperville State IL Zip Code 60565

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168313

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

B. Tammy Baldwin for Senate

Mailing Address Alice Yee
1403 N. Brick Road

City Ellensburg State WA Zip Code 98926

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168314

Amount of Each Disbursement this Period

| |
|------|
| 8.35 |
|------|

C. Tammy Baldwin for Senate

Mailing Address Elizabeth Gallagher
8 Strong PL

City Brooklyn State NY Zip Code 11231

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168315

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

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|-------|
| 68.35 |
|-------|

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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Jane Harbaugh
720 Maryland Circle

City East Ridge State TN Zip Code 37412

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168316

Amount of Each Disbursement this Period

166.70

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Shari Malloy
2113 Rangeview Lane

City Longmont State CO Zip Code 80501

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168317

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Robert Blue
490 5th St.

City Lakeport State CA Zip Code 95453

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168318

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

206.70

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Nancy Willard
72 Alpine Shores Rd.

City Bryant Pond State ME Zip Code 04219

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168319

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Nancy Lund
306 Xerxes Ave. N

City Minneapolis State MN Zip Code 55405

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168320

Amount of Each Disbursement this Period

40.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Helen Rogers
2205 State St.

City Nashville State TN Zip Code 37203

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168321

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

100.00

**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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address William Baxter
5335 Cinnamon Lake Dr

City Baytown State TX Zip Code 77521

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

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| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168322

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Barbara Borthwick
14500 Fruitvale Ave. Apt. 6149

City Saratoga State CA Zip Code 95070

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

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|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168323

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address David Varner
8408 Glenann Dr

City North Richland Hill State TX Zip Code 76182

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

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|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168324

Amount of Each Disbursement this Period

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|-------|
| 10.00 |
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SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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| 210.00 |
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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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address **Carlton Alexis**
PO Box 305691

City **St Thomas** State **VI** Zip Code **803**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168325**

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address **Jacqueline Fuqua**
1228 Rosemont Ave. NW

City **Albuquerque** State **NM** Zip Code **87104**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168326**

Amount of Each Disbursement this Period

| |
|-------|
| 35.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address **Sameer Hassan**
935 Vauxhall Street Ext

City **Quaker Hill** State **CT** Zip Code **06375**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168327**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

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|--------|
| 145.00 |
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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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Rita Stevens
5249 Windyridge Dr

City Portage State MI Zip Code 49002

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168328

Amount of Each Disbursement this Period

60.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Irene Mikkelson
12910 Dorman Road Apt. 3304

City Pineville State NC Zip Code 28134

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168329

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Kathleen Fraser
1936 Leavenworth Street

City San Francisco State CA Zip Code 94133

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168330

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

105.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Jay Gilden
4232 Childress St

City Houston State TX Zip Code 77005

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168331

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Sol Gerstenfeld
802 Irwin St

City Anchorage State AK Zip Code 99508

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168332

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Andrew Dean
4762 NW 107th Ave Apt 805

City Doral State FL Zip Code 33178

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168333

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
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SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 40.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Margaret Childs
983 E 1000 Rd.

City Lawrence State KS Zip Code 66047

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168334

Amount of Each Disbursement this Period

| |
|-------|
| 40.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Lou Rhoades
1045 Manono St.

City Hilo State HI Zip Code 96720

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168335

Amount of Each Disbursement this Period

| |
|-------|
| 33.33 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Dona Irvin
298 Meadow Ln., Apt. 407

City Poynette State WI Zip Code 53955

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168336

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 83.33 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Karen Emery
4504 New Market Banta Rd.

City Lewisburg State OH Zip Code 45338

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168337**

Amount of Each Disbursement this Period

20.00

B. Tammy Baldwin for Senate

Mailing Address Charlotte McCarthy
PO Box 3125

City Las Cruces State NM Zip Code 88003

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168338**

Amount of Each Disbursement this Period

200.00

C. Tammy Baldwin for Senate

Mailing Address Joan Kim
1905 Kanola Road

City La Habra State CA Zip Code 90631

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168339**

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

245.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Lillian Emmons
16800 S Woodland Road

City Shaker Heights State OH Zip Code 44120

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168340

Amount of Each Disbursement this Period

| |
|--------|
| 250.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Gloria Fulcher
2925 Roanoke Ct

City Bakersfield State CA Zip Code 93306

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168341

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Glista Guilford
829 Forest Ave

City Palo Alto State CA Zip Code 94301

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168342

Amount of Each Disbursement this Period

| |
|-------|
| 83.33 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 358.33 |
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Maura Brand
2804 Baccurate Dr

City Marietta State GA Zip Code 30062

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168343

Amount of Each Disbursement this Period

40.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Geraldine Allen
806 Alhambra Court

City Sugar Land State TX Zip Code 77478

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168344

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Susan Graul
6731 Forest Glen Rd

City Pittsburgh State PA Zip Code 15217

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168345

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

110.00

**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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Karen Adler
2758 Estates Ln.

City Jacksonville State FL Zip Code 32257

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168346**

Amount of Each Disbursement this Period

16.70

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Judith Sherman
3671 Oakton Ridge

City Hopkins State MN Zip Code 55305

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168347**

Amount of Each Disbursement this Period

12.50

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Rebekah Mikkelsen
550 Ortega Ave Unit 314

City Mt. View State CA Zip Code 94040

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168348**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

49.20

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Kathleen Lohr
30086 Britt

City Chapel Hill State NC Zip Code 27517

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168349

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Lorna Post
12708 Running Brook Dr

City Clarksburg State MD Zip Code 20871

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168350

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Harte Sousa
PO Box 820

City San Jacinto State CA Zip Code 92581

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168351

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

90.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address **Rebecca Abernathy**
1440 Old Campbellsville Rd.

City **Pulaski** State **TN** Zip Code **38478**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-168352

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address **John Light**
215 W. 91st Street, Apt. 43

City **New York** State **NY** Zip Code **10024**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-168353

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address **Sally Rheinfrank**
PO Box 310

City **Captiva** State **FL** Zip Code **33924**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-168354

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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Mignon Davis
10 Stream Valley Court

City Gaithersburg State MD Zip Code 20882

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168355

Amount of Each Disbursement this Period

12.00

B. Tammy Baldwin for Senate

Mailing Address Roshan Bagga
39 Parkridge Drive

City Bryn Mawr State PA Zip Code 19010

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168356

Amount of Each Disbursement this Period

5.00

C. Tammy Baldwin for Senate

Mailing Address William Fiffer
2640 Summit Drive # 304

City Glenview State IL Zip Code 60025

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168357

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

42.00

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Baldwin for Senate | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Gretchen McGinley 803 Annan Terrace | | Transaction ID : SB23-168358 |
| City Los Angeles | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Baldwin for Senate | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Baldwin for Senate | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Geraldine Clifford 1661 Pine Street Apt. 733 | | Transaction ID : SB23-168359 |
| City San Francisco | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Tammy Baldwin for Senate | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Baldwin for Senate | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Mary Garner 7442 Spring Village Drive Apt. 302 | | Transaction ID : SB23-168360 |
| City Springfield | State VA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 66.66 |
| Candidate Name Tammy Baldwin for Senate | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

136.66

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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address James Mitchell
PO Box 5119

City Irvine State CA Zip Code 92616

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168361

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Barbara Slater
3322 Amelia Run Way

City North Fort Myers State FL Zip Code 33917

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168362

Amount of Each Disbursement this Period

33.35

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Theresa O'Gorman
337A Canterbury Court

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168363

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

553.35

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Lois Hibbard
2600 S Heritage Woods Drive

City Appleton State WI Zip Code 54915

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168364

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Flora Wilber
1 Towers Park Ln Apt 1914

City San Antonio State TX Zip Code 78209

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168365

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Donald Brown
1088 Fern Ln

City Alpena State MI Zip Code 49707

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168366

Amount of Each Disbursement this Period

3.35

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

48.35

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Warren Roberts
35575 Yosemite Ave

City Davis State CA Zip Code 95616

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | 1 | 1 |

Transaction ID : SB23-168367

Amount of Each Disbursement this Period

| | | | |
|---|---|---|---|
| 3 | 3 | 3 | 5 |
|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address June Kirby
100 Leslie Drive

City Hubert State NC Zip Code 28539

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | 1 | 1 |

Transaction ID : SB23-168368

Amount of Each Disbursement this Period

| | | | |
|---|---|---|---|
| 1 | 0 | 0 | 0 |
|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address David Eckstein
25 Middlesex Turnpike

City Iselin State NJ Zip Code 08830

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | 1 | 1 |

Transaction ID : SB23-168369

Amount of Each Disbursement this Period

| | | | |
|---|---|---|---|
| 1 | 0 | 0 | 0 |
|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| | | | |
|---|---|---|---|
| 2 | 3 | 3 | 5 |
|---|---|---|---|

TOTAL This Period (last page this line number only)..... ▶

| | | | |
|---|---|---|---|
| 2 | 3 | 3 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Edie Williams
1869 Sabal Palm Drive

City Edgewater State FL Zip Code 32141

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168373

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Mary Tedrow
PO Box 187

City Groveport State OH Zip Code 43125

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168374

Amount of Each Disbursement this Period

| |
|-------|
| 35.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Ronnie Planalp
48 W 88TH St

City New York State NY Zip Code 10024

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168375

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 635.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Dee Birkel
PO Box 226

City Brady State NE Zip Code 69123

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : **SB23-168376**

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Margaret Wolfe
4115 Fleet Landing Blvd.

City Atlantic Beach State FL Zip Code 32233

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : **SB23-168377**

Amount of Each Disbursement this Period

| |
|-------|
| 33.35 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Deborah Mathias
3820 Brentwood Cres.

City Virginia Beach State VA Zip Code 23452

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : **SB23-168378**

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 63.35 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Daryl Pierce
158 Oak Leaf Cir.

City Gloversville State NY Zip Code 12078

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168379

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

B. Tammy Baldwin for Senate

Mailing Address Martha Purohit
3900 Little John Rd

City Copperopolis State CA Zip Code 95228

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168380

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

C. Tammy Baldwin for Senate

Mailing Address Carol Andrews
8320 W Cecil Ln

City Homosassa State FL Zip Code 34446

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168381

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 20.00 |
|-------|

| |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Jane Penne-Morse
1319 Clear Crest Circle

City Vista State CA Zip Code 92084

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168385

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Dean Oyer
10910 W Boswell Blvd.

City Sun City State AZ Zip Code 85373

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168386

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Mary Baniak
1327 Ridgeway Ave

City Munster State IN Zip Code 46321

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168387

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

85.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Sally Strand
11931 54th Ave N

City Minneapolis State MN Zip Code 55442

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168388**

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address John McCluhan
2037 Scally Ct.

City Concord State CA Zip Code 94518

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168389**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Joan Saegert
2043 Denmark St

City Clearwater State FL Zip Code 33763

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168390**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

90.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Jeffrey Hoke
5506 N Kenmore Ave

City Chicago State IL Zip Code 60640

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168391

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address James Stevenson
13 Westlake Point Dr

City Pinehurst State NC Zip Code 28374

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168392

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Yvette Dumont
1064 Hanley Ave

City Los Angeles State CA Zip Code 90049

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168393

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

280.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address **Martha Kester**
228 S. Maple Avenue, Apt. F

City **Oak Park** State **IL** Zip Code **60302**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168400

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address **Karen Steele**
2322 33rd Ave.

City **Astoria** State **NY** Zip Code **11106**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168401

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address **Marlene Moody**
1310 Castlerock Ave Unit 27

City **Wenatchee** State **WA** Zip Code **98801**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168402

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 145.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Vemella Hennington
59 London Dr

City Bella Vista State AR Zip Code 72715

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168403**

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Catherine Dishion
1030 E. Canon Perdido

City Santa Barbara State CA Zip Code 93103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168404**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Gretchen Davis
5206 W 58th St.

City Roeland Park State KS Zip Code 66205

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168405**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

50.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Alene Trachtenberg
23055 Mariano St.

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168409

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Kathryn Goodwin
1707 Giles Street

City Austin State TX Zip Code 78722

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168410

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Martha Graham
3113 Bluff Ln.

City Hillsborough State NC Zip Code 27278

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168411

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 40.00 |
|-------|

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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address James Tomasic
1514 Beech St

City Braddock State PA Zip Code 15104

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168412**

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Eugene Peshette
PO Box 2214

City Citrus Heights State CA Zip Code 95611

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168413**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Lee Thompson
408 East Ave.

City North Augusta State SC Zip Code 29841

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168414**

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

115.00

**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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Trisha Groom
502 N Nelson St

City Bennington State KS Zip Code 67422

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168415

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Virginia Beck-Rhea
159 S 295th Pl

City Federal Way State WA Zip Code 98003

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168416

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address D. Hillier
PO Box 246

City Poulsbo State WA Zip Code 98370

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168417

Amount of Each Disbursement this Period

120.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

165.00

**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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Donna Bruno
9837 Lakemere Dr

City Dallas State TX Zip Code 75238

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168418

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address George Jacklin
5616 W Rita Dr.

City Milwaukee State WI Zip Code 53219

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168419

Amount of Each Disbursement this Period

13.33

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Martha Binford
108 Horner Street

City Belen State NM Zip Code 87002

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168420

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

53.33

**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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Roslyn Merfeld
1701 E 10th St

City Tucson State AZ Zip Code 85719

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168421**

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Hilma Unterberger
80Seminary Ave Apt. 362

City Auburndale State MA Zip Code 02466

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168422**

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Milton Podolsky
180 East Pearson, Apt 3606

City Chicago State IL Zip Code 60611

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168423**

Amount of Each Disbursement this Period

| |
|--------|
| 400.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

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|--------|
| 500.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Elizabeth Owen
10 Park Drive

City Yalaha State FL Zip Code 34797

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168424

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Patricia Barron
525 March Avenue

City Healdsburg State CA Zip Code 95448

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168425

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Keith Housley
801 S Chester Rd Apt 514

City Swarthmore State PA Zip Code 19081

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168426

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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|--------|
| 120.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Janet Spence
PO Box 465

City State Zip Code
Dennis MA 02638

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : **SB23-168427**

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address John MacLeod
46 Red Maple Way

City State Zip Code
Cincinnati OH 45246

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : **SB23-168428**

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Rhoda Weinstein
8060 E Girard Ave Apt 709

City State Zip Code
Denver CO 80231

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : **SB23-168429**

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 2 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 2 | 5 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Judith Ancell
37524 Burton Court

City Farmington State MI Zip Code 48331

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168430

Amount of Each Disbursement this Period

| |
|-------|
| 30.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Bonnie Mills
35658 Casa Vista Street

City Yucaipa State CA Zip Code 92399

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168431

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Carolyn McFarland
4200 Duval Street

City Austin State TX Zip Code 78751

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168432

Amount of Each Disbursement this Period

| |
|-------|
| 15.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 65.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Helen Smiler
324 Forest Street

City Oakland State CA Zip Code 94618

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168433

Amount of Each Disbursement this Period

33.35

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Sam Coltrin
PO Box 364

City Penryn State CA Zip Code 95663

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168434

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Karl Pribram
PO Box 679

City Warrenton State VA Zip Code 20188

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168435

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

303.35

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Christine Luce
100 Walton Street

City Portland State ME Zip Code 04103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168436**

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Katharine Kane
10 Chestnut Street

City Boston State MA Zip Code 02108

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168437**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Sara Beauchamp
3620 N Carefree Cir.

City Colorado Springs State CO Zip Code 80917

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168438**

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

120.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Benjamin Hochman
8116 W. Cliff Dr

City Knoxville State TN Zip Code 37909

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168439**

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Lucille Makarov
5335 Breeze Hill Pl.

City Troy State MI Zip Code 48098

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168440**

Amount of Each Disbursement this Period

1.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Rose Moring
4124 Grantley Rd.

City Toledo State OH Zip Code 43613

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168441**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

31.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Karolyn Poynter
7351 Willow Rd. Unit 7

City Frederick State MD Zip Code 21702

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168442**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Barbara Sacharow
7 E. 14th St.

City New York State NY Zip Code 10003

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168443**

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Lana Edwards
3206 Palm Drive

City Delray Beach State FL Zip Code 33483

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168444**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

50.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Tammy Baldwin for Senate

Mailing Address Richard Cornetti
1012 Baxter Dr

City Plano State TX Zip Code 75025

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168445**

Amount of Each Disbursement this Period
20.00

Full Name (Last, First, Middle Initial)
B. Tammy Baldwin for Senate

Mailing Address Wanda Pruitt
3781 S. Creekside Dr

City New Palestine State IN Zip Code 46163

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168446**

Amount of Each Disbursement this Period
10.00

Full Name (Last, First, Middle Initial)
C. Tammy Baldwin for Senate

Mailing Address Richard Rubenstein
39 Appaloosa Ln

City Bell Canyon State CA Zip Code 91307

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168447**

Amount of Each Disbursement this Period
25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶ 55.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Chloe Davenport
216 NW 70th St.

City Seattle State WA Zip Code 98117

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168448**

Amount of Each Disbursement this Period

3.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Dolores Hillier
PO Box 246

City Poulsbo State WA Zip Code 98370

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168449**

Amount of Each Disbursement this Period

40.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Clare Smith-Larson
1200 5th Ave. SE

City Altoona State IA Zip Code 50009

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168450**

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

53.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Shirley Swan
6821 Greencove Ave.

City Evansville State IN Zip Code 47715

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168451

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Marybelle Suczek
P.O. Box 2411

City South Padre Island State TX Zip Code 78597

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168452

Amount of Each Disbursement this Period

| |
|-------|
| 33.33 |
|-------|

Full Name (Last, First, Middle Initial)

C. Berkley for Senate

Mailing Address William Hansell
2785 Shady Lane

City Eureka State CA Zip Code 95501

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Berkley for Senate

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168453

Amount of Each Disbursement this Period

| |
|-------|
| 15.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 68.33 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Berkley for Senate

Mailing Address **Harte Sousa**
PO Box 820

City **San Jacinto** State **CA** Zip Code **92581**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Berkley for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168454

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Berkley for Senate

Mailing Address **Paul Westmoore**
5670 E River Rd

City **Grand Island** State **NY** Zip Code **14072**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Berkley for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168455

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address **Samuel Schiffman**
2704 Carlaris Rd.

City **San Marino** State **CA** Zip Code **91108**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168456

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 125.00 |
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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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Betty Weaver 3859 Shagbark Ln | | Transaction ID : SB23-168457 |
| City Beavercreek | State OH | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Marjon Riekerk 10051 Dibble Ave. NW | | Transaction ID : SB23-168458 |
| City Seattle | State WA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Beverly Lowe 1561 Porters Point Rd. | | Transaction ID : SB23-168459 |
| City Colchester | State VT | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 30.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... ▶ | 100.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address David Nolan
305 Elmont Avenue

City Folsom State PA Zip Code 19033

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168460**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Frankie Tester
830 Logan Blvd S

City Naples State FL Zip Code 34119

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168461**

Amount of Each Disbursement this Period

| |
|-------|
| 30.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Jay Johnson
66 Ninth Avenue, Apt. 7W

City New York State NY Zip Code 10011

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168462**

Amount of Each Disbursement this Period

| |
|-------|
| 83.33 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 123.33 |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Phyllis Yarnold
2412 Yorktown St., Apt. 280

City Houston State TX Zip Code 77056

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168463

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Frank Gambetty
2323 7th St. SE, Apt. D205

City Puyallup State WA Zip Code 98374

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168464

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Carolyn Wiljanen
42 John Alden Road

City Plymouth State MA Zip Code 02360

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168465

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

75.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Carol Wiley
PO Box 542

City Durango State CO Zip Code 81302

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168466

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Audrey Foley
630 W Bonita Ave Apt 2M

City Claremont State CA Zip Code 91711

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168467

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Marita Maxey
1052 W Balmoral Ave., Apt. 2F

City Chicago State IL Zip Code 60640

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168468

Amount of Each Disbursement this Period

| |
|-------|
| 35.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 155.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Nancy Hendrickson
PO Box 21344

City Oxnard State CA Zip Code 93034

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168469**

Amount of Each Disbursement this Period

16.66

B. Friends of Cheri Bustos

Mailing Address Eva Griswold
12107 Gladewick Dr.

City Houston State TX Zip Code 77077

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168470**

Amount of Each Disbursement this Period

20.00

C. Friends of Cheri Bustos

Mailing Address Micaela Reddy
6 Reservoir Pl

City Belleville State NJ Zip Code 07109

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168471**

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

61.66

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Sandra Jurey
10 Sharon Dr

City Wellington State NV Zip Code 89444

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168472

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Sondra Langweil
707 Sydney Drive

City Annapolis State MD Zip Code 21401

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168473

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Lindsay Richards
204 Beverly Avenue

City Missoula State MT Zip Code 59801

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168474

Amount of Each Disbursement this Period

66.66

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

116.66

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Hilda Korner
255 South Rengstorff Avenue Apt. 1

City Mountain View State CA Zip Code 94040

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168475

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Lou Grogan
770 Shelter Bay dr.

City LaConner State WA Zip Code 98257

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168476

Amount of Each Disbursement this Period

16.66

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Kathleen Brauge
PO Box 524

City Empire State CO Zip Code 80438

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168477

Amount of Each Disbursement this Period

8.33

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

54.99

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Bettie Baker 13802 Larchmere Blvd | | Transaction ID : SB23-168478 |
| City Cleveland | State OH | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 500.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Celeste VanMyers PO Box 46126 | | Transaction ID : SB23-168479 |
| City Los Angeles | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 60.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Lillian Rubenstein 8508 Saint Louis Avenue | | Transaction ID : SB23-168480 |
| City Skokie | State IL | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 15.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

575.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Kathleen Haydel
1696 Sandyrock Ln.

City San Jose State CA Zip Code 95125

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168481

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Bruce Hellmer
308 Pineknoll Ct

City Brighton State MI Zip Code 48116

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168482

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Sarah Paulson
1208 Ferdon Rd

City Ann Arbor State MI Zip Code 48104

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168483

Amount of Each Disbursement this Period

66.66

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

111.66

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Beth Myers 4070 W Forrest Park DR | | Transaction ID : SB23-168484 |
| City Bloomington | State IN | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Barbara Rorinson 3480 Mountain View Ave | | Transaction ID : SB23-168485 |
| City Carmel | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 16.66 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Susan Dreghorn 724 Arlington Ave. | | Transaction ID : SB23-168486 |
| City Naperville | State IL | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 76.66 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Alice Yee
1403 N. Brick Road

City Ellensburg State WA Zip Code 98926

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168487

Amount of Each Disbursement this Period

8.33

B. Friends of Cheri Bustos

Mailing Address Elizabeth Gallagher
8 Strong PL

City Brooklyn State NY Zip Code 11231

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168488

Amount of Each Disbursement this Period

50.00

C. Friends of Cheri Bustos

Mailing Address Margaret Langmuir
9 Bentbrook Road

City Sudbury State MA Zip Code 01776

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168489

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

83.33

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Jane Harbaugh
720 Maryland Circle

City East Ridge State TN Zip Code 37412

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168490**

Amount of Each Disbursement this Period

166.66

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Rosemary Dorney
4205 Odana Rd.

City Madison State WI Zip Code 53711

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168491**

Amount of Each Disbursement this Period

22.50

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Robert Blue
490 5th St.

City Lakeport State CA Zip Code 95453

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168492**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

209.16

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Nancy Willard 72 Alpine Shores Rd. | | Transaction ID : SB23-168493 |
| City Bryant Pond | State ME | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Nancy Lund 306 Xerxes Ave. N | | Transaction ID : SB23-168494 |
| City Minneapolis | State MN | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 40.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Helen Rogers 2205 State St. | | Transaction ID : SB23-168495 |
| City Nashville | State TN | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 100.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address **Barbara Borthwick**
14500 Fruitvale Ave. Apt. 6149

City **Saratoga** State **CA** Zip Code **95070**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168496**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address **Lois Laine**
1072 Serrano CT

City **Lafayette** State **CA** Zip Code **94549**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168497**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address **David Varner**
8408 Glenann Dr

City **North Richland Hill** State **TX** Zip Code **76182**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168498**

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

135.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address **Carlton Alexis**
PO Box 305691

City **St Thomas** State **VI** Zip Code **803**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168499

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address **Jacqueline Fuqua**
1228 Rosemont Ave. NW

City **Albuquerque** State **NM** Zip Code **87104**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168500

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address **Jeanette Cousineau**
3247 Corte Valencia

City **Fairfield** State **CA** Zip Code **94534**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168501

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

185.00

**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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Sameer Hassan 935 Vauxhall Street Ext | | Transaction ID : SB23-168502 |
| City Quaker Hill | State CT | |
| Zip Code 06375 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Irene Mikkelson 12910 Dorman Road Apt. 3304 | | Transaction ID : SB23-168503 |
| City Pineville | State NC | |
| Zip Code 28134 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Friends of Cheri Bustos | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Kathleen Fraser 1936 Leavenworth Street | | Transaction ID : SB23-168504 |
| City San Francisco | State CA | |
| Zip Code 94133 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

55.00

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 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)
EMILY's List

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Jay Gilden 4232 Childress St | | Transaction ID : SB23-168505 |
| City Houston | State TX | |
| Zip Code 77005 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Sol Gerstenfeld 802 Irwin St | | Transaction ID : SB23-168506 |
| City Anchorage | State AK | |
| Zip Code 99508 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Ina Simon 1511 Carlisle Ln | | Transaction ID : SB23-168507 |
| City DeKalb | State IL | |
| Zip Code 60115 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 30.00 |
| Candidate Name Friends of Cheri Bustos | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 50.00 |
| |

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Andrew Dean
4762 NW 107th Ave Apt 805

City Doral State FL Zip Code 33178

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168508

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Lou Rhoades
1045 Manono St.

City Hilo State HI Zip Code 96720

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168509

Amount of Each Disbursement this Period

33.33

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Sandra Reiff
3478 S Carol Dr.

City Flagstaff State AZ Zip Code 86001

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168510

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

63.33

**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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Karen Emery 4504 New Market Banta Rd. | | Transaction ID : SB23-168511 |
| City Lewisburg State OH Zip Code 45338 | Amount of Each Disbursement this Period 20.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Charlotte McCarthy PO Box 3125 | | Transaction ID : SB23-168512 |
| City Las Cruces State NM Zip Code 88003 | Amount of Each Disbursement this Period 200.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Joan Kim 1905 Kanola Road | | Transaction ID : SB23-168513 |
| City La Habra State CA Zip Code 90631 | Amount of Each Disbursement this Period 25.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 245.00 |
| 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Gloria Fulcher 2925 Roanoke Ct | | Transaction ID : SB23-168514 |
| City Bakersfield | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Glista Guilford 829 Forest Ave | | Transaction ID : SB23-168515 |
| City Palo Alto | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 83.33 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Maura Brand 2804 Baccurate Dr | | Transaction ID : SB23-168516 |
| City Marietta | State GA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 40.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

148.33

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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Geraldine Allen 806 Alhambra Court | | Transaction ID : SB23-168517 |
| City Sugar Land | State TX | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Susan Graul 6731 Forest Glen Rd | | Transaction ID : SB23-168518 |
| City Pittsburgh | State PA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Karen Adler 2758 Estates Ln. | | Transaction ID : SB23-168519 |
| City Jacksonville | State FL | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 16.66 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

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|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 86.66 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Judith Sherman
3671 Oakton Ridge

City Hopkins State MN Zip Code 55305

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168520**

Amount of Each Disbursement this Period

12.50

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Rebekah Mikkelsen
550 Ortega Ave Unit 314

City Mt. View State CA Zip Code 94040

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168521**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Kathleen Lohr
30086 Britt

City Chapel Hill State NC Zip Code 27517

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168522**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

52.50

**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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Elaine Koenigsberg 180 E. Pearson # 4905 | | Transaction ID : SB23-168523 |
| City Chicago | State IL Zip Code 60611 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Harte Sousa PO Box 820 | | Transaction ID : SB23-168524 |
| City San Jacinto | State CA Zip Code 92581 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address John Light 215 W. 91st Street, Apt. 43 | | Transaction ID : SB23-168525 |
| City New York | State NY Zip Code 10024 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 90.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Sally Rheinfrank
PO Box 310

City Captiva State FL Zip Code 33924

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168526

Amount of Each Disbursement this Period

166.66

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Mignon Davis
10 Stream Valley Court

City Gaithersburg State MD Zip Code 20882

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168527

Amount of Each Disbursement this Period

12.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Roshan Bagga
39 Parkridge Drive

City Bryn Mawr State PA Zip Code 19010

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168528

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

183.66

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address William Fiffer
2640 Summit Drive # 304

City Glenview State IL Zip Code 60025

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168529**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Gretchen McGinley
803 Annan Terrace

City Los Angeles State CA Zip Code 90042

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168530**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Geraldine Clifford
1661 Pine Street Apt. 733

City San Francisco State CA Zip Code 94109

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168531**

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

95.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address **Mary Garner**
7442 Spring Village Drive Apt. 302

City **Springfield** State **VA** Zip Code **22150**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168532

Amount of Each Disbursement this Period

| |
|-------|
| 66.66 |
|-------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address **James Mitchell**
PO Box 5119

City **Irvine** State **CA** Zip Code **92616**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168533

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address **Barbara Slater**
3322 Amelia Run Way

City **North Fort Myers** State **FL** Zip Code **33917**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168534

Amount of Each Disbursement this Period

| |
|-------|
| 33.33 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 599.99 |
|--------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Theresa O'Gorman
337A Canterbury Court

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168535

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Flora Wilber
1 Towers Park Ln Apt 1914

City San Antonio State TX Zip Code 78209

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168536

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Donald Brown
1088 Fern Ln

City Alpena State MI Zip Code 49707

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168537

Amount of Each Disbursement this Period

3.33

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

43.33

**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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Warren Roberts 35575 Yosemite Ave | | Transaction ID : SB23-168538 |
| City Davis State CA Zip Code 95616 | Amount of Each Disbursement this Period 33.33 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address June Kirby 100 Leslie Drive | | Transaction ID : SB23-168539 |
| City Hubert State NC Zip Code 28539 | Amount of Each Disbursement this Period 100.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address David Eckstein 25 Middlesex Turnpike | | Transaction ID : SB23-168540 |
| City Iselin State NJ Zip Code 08830 | Amount of Each Disbursement this Period 100.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

233.33

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address **Monica Morganstein**
14-N 880 Lac Du Beatrice

City **Dundee** State **IL** Zip Code **60118**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168541

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address **Joyce Harkness**
PO Box 694

City **Ralston** State **WY** Zip Code **82440**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168542

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address **Irma Howarth**
14 S. Oak Circle

City **Asheville** State **NC** Zip Code **28806**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168543

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 205.00 |
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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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address **Mary Tedrow**
PO Box 187

City **Groveport** State **OH** Zip Code **43125**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168544

Amount of Each Disbursement this Period

| |
|-------|
| 35.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address **Margaret Wolfe**
4115 Fleet Landing Blvd.

City **Atlantic Beach** State **FL** Zip Code **32233**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168545

Amount of Each Disbursement this Period

| |
|-------|
| 33.33 |
|-------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address **Deborah Mathias**
3820 Brentwood Cres.

City **Virginia Beach** State **VA** Zip Code **23452**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168546

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 73.33 |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Daryl Pierce
158 Oak Leaf Cir.

City Gloversville State NY Zip Code 12078

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168547

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Martha Purohit
3900 Little John Rd

City Copperopolis State CA Zip Code 95228

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168548

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Carol Andrews
8320 W Cecil Ln

City Homosassa State FL Zip Code 34446

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168549

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 20.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Kathleen Nieves
226 Holland Ave.

City Medford State NY Zip Code 11763

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168550

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address William Baxter
5335 Cinnamon Lake Dr

City Baytown State TX Zip Code 77521

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168551

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Donna Lennox
93 Goodwin Ave.

City Staten Island State NY Zip Code 10314

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168552

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

135.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address **Mary Duran**
2192 Lumbre Ct.

City **Santa Fe** State **NM** Zip Code **87505**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168553

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address **Jane Penne-Morse**
1319 Clear Crest Circle

City **Vista** State **CA** Zip Code **92084**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168554

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address **Dean Oyer**
10910 W Boswell Blvd.

City **Sun City** State **AZ** Zip Code **85373**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168555

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
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| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Mary Baniak 1327 Ridgeway Ave | | Transaction ID : SB23-168556 |
| City Munster | State IN | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 90.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address John McCluhan 2037 Scally Ct. | | Transaction ID : SB23-168557 |
| City Concord | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Joan Saegert 2043 Denmark St | | Transaction ID : SB23-168558 |
| City Clearwater | State FL | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 90.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 90.00 |
| |

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Jeffrey Hoke
5506 N Kenmore Ave

City Chicago State IL Zip Code 60640

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168559

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address James Stevenson
13 Westlake Point Dr

City Pinehurst State NC Zip Code 28374

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168560

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Yvette Dumont
1064 Hanley Ave

City Los Angeles State CA Zip Code 90049

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168561

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

280.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Robert Benson
24 Amber Ln.

City Lafayette State CA Zip Code 94549

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168562**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Marilyn Willis
347 Sportsman Rd

City Murphysboro State IL Zip Code 62966

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168563**

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Eleanor Elliott
15 W. 72nd St., Apt. 9T

City New York State NY Zip Code 10023

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168564**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

50.00

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Cynthia McCormack 2657 N. 70th St | | Transaction ID : SB23-168565 |
| City Waywatosha | State WI | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Leonard Bacon 3636 Cavalear Dr | | Transaction ID : SB23-168566 |
| City Toledo | State OH | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 41.66 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Karen Steele 2322 33rd Ave. | | Transaction ID : SB23-168567 |
| City Astoria | State NY | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 71.66 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address **Marlene Moody**
1310 Castlerock Ave Unit 27

City **Wenatchee** State **WA** Zip Code **98801**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168568

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address **Catherine Dishion**
1030 E. Canon Perdido

City **Santa Barbara** State **CA** Zip Code **93103**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168569

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address **Gretchen Davis**
5206 W 58th St.

City **Roeland Park** State **KS** Zip Code **66205**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168570

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 65.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Ralph Gallus
35 County Road 30 SE

City Montrose State MN Zip Code 55363

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168571**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Elizabeth Lay
6842 E. Earll Dr.

City Scottsdale State AZ Zip Code 85251

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168572**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Alene Trachtenberg
23055 Mariano St.

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168573**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 40.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Kathryn Goodwin
1707 Giles Street

City Austin State TX Zip Code 78722

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168574**

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Martha Graham
3113 Bluff Ln.

City Hillsborough State NC Zip Code 27278

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168575**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address James Tomasic
1514 Beech St

City Braddock State PA Zip Code 15104

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168576**

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

40.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Eugene Peshette
PO Box 2214

City Citrus Heights State CA Zip Code 95611

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168577

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Lee Thompson
408 East Ave.

City North Augusta State SC Zip Code 29841

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168578

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Trisha Groom
502 N Nelson St

City Bennington State KS Zip Code 67422

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168579

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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| 125.00 |
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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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Virginia Beck-Rhea 159 S 295th Pl | | Transaction ID : SB23-168580 |
| City Federal Way | State WA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Mary Anderson 4966 W Black Stallion Dr | | Transaction ID : SB23-168581 |
| City Prescott | State AZ | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address D. Hillier PO Box 246 | | Transaction ID : SB23-168582 |
| City Poulsbo | State WA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 120.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 165.00 |
| 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Donna Bruno 9837 Lakemere Dr | | Transaction ID : SB23-168583 |
| City Dallas | State TX | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address George Jacklin 5616 W Rita Dr. | | Transaction ID : SB23-168584 |
| City Milwaukee | State WI | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 13.33 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Martha Binford 108 Horner Street | | Transaction ID : SB23-168585 |
| City Belen | State NM | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

53.33

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Milton Podolsky
180 East Pearson, Apt 3606

City Chicago State IL Zip Code 60611

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-168586**

Amount of Each Disbursement this Period

| |
|--------|
| 400.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Elizabeth Owen
10 Park Drive

City Yalaha State FL Zip Code 34797

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-168587**

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Patricia Barron
525 March Avenue

City Healdsburg State CA Zip Code 95448

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-168588**

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|--------|
| 500.00 |
|--------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Rhoda Weinstein
8060 E Girard Ave Apt 709

City Denver State CO Zip Code 80231

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168592

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Judith Ancell
37524 Burton Court

City Farmington State MI Zip Code 48331

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168593

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Mary Reale
Girl Zone 110 Central Avenue

City S. Burlington State VT Zip Code 05403

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168594

Amount of Each Disbursement this Period

75.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

130.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address **Bonnie Mills**
35658 Casa Vista Street

City **Yucaipa** State **CA** Zip Code **92399**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
 Disbursement For: 2012 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168595

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address **Ruth Jones**
5316 Cribari Gln.

City **San Jose** State **CA** Zip Code **95135**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
 Disbursement For: 2012 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168596

Amount of Each Disbursement this Period

| |
|-------|
| 30.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address **Carolyn McFarland**
4200 Duval Street

City **Austin** State **TX** Zip Code **78751**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
 Disbursement For: 2012 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168597

Amount of Each Disbursement this Period

| |
|-------|
| 15.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 55.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Helen Smiler
324 Forest Street

City Oakland State CA Zip Code 94618

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168598**

Amount of Each Disbursement this Period

| |
|-------|
| 33.33 |
|-------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Sam Coltrin
PO Box 364

City Penryn State CA Zip Code 95663

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168599**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Christine Luce
100 Walton Street

City Portland State ME Zip Code 04103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168600**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 63.33 |
|-------|

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 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)
EMILY's List

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Benjamin Hochman 8116 W. Cliff Dr | | Transaction ID : SB23-168601 Amount of Each Disbursement this Period 10.00 |
| City Knoxville | State TN Zip Code 37909 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Karolyn Poynter 7351 Willow Rd. Unit 7 | | Transaction ID : SB23-168602 Amount of Each Disbursement this Period 20.00 |
| City Frederick | State MD Zip Code 21702 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Barbara Sacharow 7 E. 14th St. | | Transaction ID : SB23-168603 Amount of Each Disbursement this Period 10.00 |
| City New York | State NY Zip Code 10003 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 40.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Lana Edwards
3206 Palm Drive

City Delray Beach State FL Zip Code 33483

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168604**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Richard Cornetti
1012 Baxter Dr

City Plano State TX Zip Code 75025

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168605**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Wanda Pruitt
3781 S. Creekside Dr

City New Palestine State IN Zip Code 46163

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168606**

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

50.00

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Richard Rubenstein 39 Appaloosa Ln | | Transaction ID : SB23-168607 |
| City Bell Canyon | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Chloe Davenport 216 NW 70th St. | | Transaction ID : SB23-168608 |
| City Seattle | State WA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 3.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Dolores Hillier PO Box 246 | | Transaction ID : SB23-168609 |
| City Poulsbo | State WA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 40.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 68.00 |
| |

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address **Clare Smith-Larson**
1200 5th Ave. SE

City **Altoona** State **IA** Zip Code **50009**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168610**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address **Myra Gable**
1210 Colby Dr.

City **Davis** State **CA** Zip Code **95616**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168611**

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address **Marybelle Suczek**
P.O. Box 2411

City **South Padre Island** State **TX** Zip Code **78597**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168612**

Amount of Each Disbursement this Period

| |
|-------|
| 33.33 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 93.33 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Frank Gambetty
2323 7th St. SE, Apt. D205

City Puyallup State WA Zip Code 98374

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168619

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Carolyn Wiljanen
42 John Alden Road

City Plymouth State MA Zip Code 02360

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168620

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Carol Wiley
PO Box 542

City Durango State CO Zip Code 81302

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168621

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 125.00 |
|--------|

| |
|--|
| |
|--|

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Audrey Foley 630 W Bonita Ave Apt 2M | | Transaction ID : SB23-168622 |
| City Claremont | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Bernice Jasek 2505 Evergreen Rd. N | | Transaction ID : SB23-168623 |
| City Fargo | State ND | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Marita Maxey 1052 W Balmoral Ave., Apt. 2F | | Transaction ID : SB23-168624 |
| City Chicago | State IL | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 35.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 65.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Sandra Jurey
10 Sharon Dr

City Wellington State NV Zip Code 89444

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168628

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Mary Harrington
1318 Pacific St.

City San Luis Obispo State CA Zip Code 93401

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168629

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Sondra Langweil
707 Sydney Drive

City Annapolis State MD Zip Code 21401

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168630

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

70.00

**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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Lindsay Richards 204 Beverly Avenue | | Transaction ID : SB23-168631 |
| City Missoula | State MT Zip Code 59801 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 66.66 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Hilda Korner 255 South Rengstorff Avenue Apt. 1 | | Transaction ID : SB23-168632 |
| City Mountain View | State CA Zip Code 94040 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 30.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Lou Grogan 770 Shelter Bay dr. | | Transaction ID : SB23-168633 |
| City LaConner | State WA Zip Code 98257 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 16.66 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... ▶ | 113.32 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address **Bettie Baker**
13802 Larchmere Blvd

City **Cleveland** State **OH** Zip Code **44120**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168637

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address **Celeste VanMyers**
PO Box 46126

City **Los Angeles** State **CA** Zip Code **90046**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168638

Amount of Each Disbursement this Period

60.00

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address **Owline Gregory**
73477 Feather Trail

City **Palm Desert** State **CA** Zip Code **92260**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168639

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

610.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Anitta Cancell
236 Glen Avenue

City Millburn State NJ Zip Code 07041

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168640

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 1 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Kathleen Haydel
1696 Sandyrock Ln.

City San Jose State CA Zip Code 95125

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168641

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 2 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Bruce Hellmer
308 Pineknoll Ct

City Brighton State MI Zip Code 48116

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168642

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)..... ▶

| | | | | | |
|---|---|---|---|---|---|
| 1 | 4 | 5 | . | 0 | 0 |
|---|---|---|---|---|---|

| | | | | | |
|---|---|---|---|---|---|
| 1 | 4 | 5 | . | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Sarah Paulson
1208 Ferdon Rd

City Ann Arbor State MI Zip Code 48104

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-168643**

Amount of Each Disbursement this Period

| |
|-------|
| 66.66 |
|-------|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Barbara Rorinson
3480 Mountain View Ave

City Carmel State CA Zip Code 93923

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-168644**

Amount of Each Disbursement this Period

| |
|-------|
| 16.66 |
|-------|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Jean Shadrach
3530 Fordham Dr

City Anchorage State AK Zip Code 99508

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-168645**

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|--------|
| 133.32 |
|--------|

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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2011 |
| Mailing Address Suzanne Carr 3129 Pattiz Avenue | | Transaction ID : SB23-168646 Amount of Each Disbursement this Period _____ 5.00 |
| City Long Beach State CA Zip Code 90808 | | |
| Purpose of Disbursement Candidate Contrib Earmarked | | |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2011 |
| Mailing Address Susan Dreghorn 724 Arlington Ave. | | Transaction ID : SB23-168647 Amount of Each Disbursement this Period _____ 10.00 |
| City Naperville State IL Zip Code 60565 | | |
| Purpose of Disbursement Candidate Contrib Earmarked | | |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement M M M / D D D / Y Y Y Y Y Y 12 / 01 / 2011 |
| Mailing Address Jennie Mendelson 7321 South Shore Drive Apt. 5D | | Transaction ID : SB23-168648 Amount of Each Disbursement this Period _____ 5.00 |
| City Chicago State IL Zip Code 60649 | | |
| Purpose of Disbursement Candidate Contrib Earmarked | | |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|---|-------------|
| SUBTOTAL of Disbursements This Page (optional)..... ▶ | _____ 20.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Alice Yee
1403 N. Brick Road

City Ellensburg State WA Zip Code 98926

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168649

Amount of Each Disbursement this Period

| |
|------|
| 8.33 |
|------|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Jane Harbaugh
720 Maryland Circle

City East Ridge State TN Zip Code 37412

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168650

Amount of Each Disbursement this Period

| |
|--------|
| 166.66 |
|--------|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Shari Malloy
2113 Rangeview Lane

City Longmont State CO Zip Code 80501

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168651

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 194.99 |
|--------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Rosemary Dorney
4205 Odana Rd.

City Madison State WI Zip Code 53711

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168652

Amount of Each Disbursement this Period

| |
|-------|
| 22.50 |
|-------|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Robert Blue
490 5th St.

City Lakeport State CA Zip Code 95453

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168653

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Nancy Willard
72 Alpine Shores Rd.

City Bryant Pond State ME Zip Code 04219

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168654

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 52.50 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Nancy Lund
306 Xerxes Ave. N

City Minneapolis State MN Zip Code 55405

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168655

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 4 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Helen Rogers
2205 State St.

City Nashville State TN Zip Code 37203

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168656

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 5 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address William Baxter
5335 Cinnamon Lake Dr

City Baytown State TX Zip Code 77521

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168657

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 2 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | |
|---|---|---|---|---|---|
| 2 | 9 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

| | | | | | |
|---|---|---|---|---|---|
| 2 | 9 | 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 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)
EMILY's List

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Sameer Hassan 935 Vauxhall Street Ext | | Transaction ID : SB23-168661 |
| City Quaker Hill | State CT | |
| Zip Code 06375 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 10.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Rita Stevens 5249 Windyridge Dr | | Transaction ID : SB23-168662 |
| City Portage | State MI | |
| Zip Code 49002 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 60.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Irene Mikkelson 12910 Dorman Road Apt. 3304 | | Transaction ID : SB23-168663 |
| City Pineville | State NC | |
| Zip Code 28134 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 25.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|--|-------|
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Margaret Childs
983 E 1000 Rd.

City Lawrence State KS Zip Code 66047

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168670

Amount of Each Disbursement this Period

| |
|-------|
| 40.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Lou Rhoades
1045 Manono St.

City Hilo State HI Zip Code 96720

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168671

Amount of Each Disbursement this Period

| |
|-------|
| 33.33 |
|-------|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Sandra Reiff
3478 S Carol Dr.

City Flagstaff State AZ Zip Code 86001

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168672

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 83.33 |
|-------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Joan Kim
1905 Kanola Road

City La Habra State CA Zip Code 90631

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168676**

Amount of Each Disbursement this Period

25.00

B. McCaskill for Missouri

Mailing Address Lillian Emmons
16800 S Woodland Road

City Shaker Heights State OH Zip Code 44120

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168677**

Amount of Each Disbursement this Period

250.00

C. McCaskill for Missouri

Mailing Address Gloria Fulcher
2925 Roanoke Ct

City Bakersfield State CA Zip Code 93306

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168678**

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

300.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Glista Guilford
829 Forest Ave

City Palo Alto State CA Zip Code 94301

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168679

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 8 | 3 | . | 3 | 3 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Maura Brand
2804 Baccurate Dr

City Marietta State GA Zip Code 30062

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168680

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 4 | 0 | . | 0 | 0 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Geraldine Allen
806 Alhambra Court

City Sugar Land State TX Zip Code 77478

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168681

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 5 | 0 | . | 0 | 0 |
|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | |
|---|---|---|---|---|
| 1 | 7 | . | 3 | 3 |
|---|---|---|---|---|

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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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Susan Graul 6731 Forest Glen Rd | | Transaction ID : SB23-168682 |
| City Pittsburgh | State PA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Karen Adler 2758 Estates Ln. | | Transaction ID : SB23-168683 |
| City Jacksonville | State FL | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 16.66 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Judith Sherman 3671 Oakton Ridge | | Transaction ID : SB23-168684 |
| City Hopkins | State MN | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 12.50 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

49.16

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Mignon Davis
10 Stream Valley Court

City Gaithersburg State MD Zip Code 20882

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168691**

Amount of Each Disbursement this Period

12.00

B. McCaskill for Missouri

Mailing Address Roshan Bagga
39 Parkridge Drive

City Bryn Mawr State PA Zip Code 19010

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168692**

Amount of Each Disbursement this Period

5.00

C. McCaskill for Missouri

Mailing Address William Fiffer
2640 Summit Drive # 304

City Glenview State IL Zip Code 60025

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168693**

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

42.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Donald Brown
1088 Fern Ln

City Alpena State MI Zip Code 49707

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168700

Amount of Each Disbursement this Period

| | | | |
|---|---|---|---|
| 3 | . | 3 | 3 |
|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Warren Roberts
35575 Yosemite Ave

City Davis State CA Zip Code 95616

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168701

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 3 | 3 | . | 3 | 3 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address June Kirby
100 Leslie Drive

City Hubert State NC Zip Code 28539

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168702

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 1 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| | | | |
|---|---|---|---|
| 1 | 3 | 6 | 6 |
|---|---|---|---|

TOTAL This Period (last page this line number only)..... ▶

| | | | |
|---|---|---|---|
| 1 | 3 | 6 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Judith Mitchels
1757 S Proctor St

City Tacoma State WA Zip Code 98405

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168709

Amount of Each Disbursement this Period

| | | | | | | | | | | | | | |
|---|---|---|--|--|--|--|--|--|--|--|--|--|--|
| 5 | 0 | 0 | | | | | | | | | | | |
|---|---|---|--|--|--|--|--|--|--|--|--|--|--|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Dee Birkel
PO Box 226

City Brady State NE Zip Code 69123

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168710

Amount of Each Disbursement this Period

| | | | | | | | | | | | | | |
|---|---|---|--|--|--|--|--|--|--|--|--|--|--|
| 2 | 5 | 0 | | | | | | | | | | | |
|---|---|---|--|--|--|--|--|--|--|--|--|--|--|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Susan Wickersham
1303 E Maplewood Ave

City Bellingham State WA Zip Code 98225

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168711

Amount of Each Disbursement this Period

| | | | | | | | | | | | | | |
|---|---|---|--|--|--|--|--|--|--|--|--|--|--|
| 2 | 5 | 0 | | | | | | | | | | | |
|---|---|---|--|--|--|--|--|--|--|--|--|--|--|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | | | | | | | | | |
|---|---|---|--|--|--|--|--|--|--|--|--|--|--|
| 5 | 5 | 0 | | | | | | | | | | | |
|---|---|---|--|--|--|--|--|--|--|--|--|--|--|

| | | | | | | | | | | | | | |
|---|---|---|--|--|--|--|--|--|--|--|--|--|--|
| 5 | 5 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Margaret Wolfe
4115 Fleet Landing Blvd.

City Atlantic Beach State FL Zip Code 32233

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168712

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 3 | 3 | . | 3 | 3 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Daryl Pierce
158 Oak Leaf Cir.

City Gloversville State NY Zip Code 12078

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168713

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 1 | 0 | . | 0 | 0 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Marion Sussman
3249 W. 65th Street

City Chicago State IL Zip Code 60629

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168714

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 1 | 5 | . | 0 | 0 |
|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| | | | | |
|---|---|---|---|---|
| 5 | 8 | . | 3 | 3 |
|---|---|---|---|---|

TOTAL This Period (last page this line number only)..... ▶

| | | | | |
|---|---|---|---|---|
| 5 | 8 | . | 3 | 3 |
|---|---|---|---|---|

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Eleanor Elliott
15 W. 72nd St., Apt. 9T

City New York State NY Zip Code 10023

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168727

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Cynthia McCormack
2657 N. 70th St

City Waywatawa State WI Zip Code 53213

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168728

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Leonard Bacon
3636 Cavalear Dr

City Toledo State OH Zip Code 43606

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168729

Amount of Each Disbursement this Period

41.66

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

71.66

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Karen Steele
2322 33rd Ave.

City Astoria State NY Zip Code 11106

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168730

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Barbara Hero
496 Loop Rd

City Topsham State ME Zip Code 04086

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168731

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Marlene Moody
1310 Castlerock Ave Unit 27

City Wenatchee State WA Zip Code 98801

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168732

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

55.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Catherine Dishion
1030 E. Canon Perdido

City Santa Barbara State CA Zip Code 93103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168733

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Gretchen Davis
5206 W 58th St.

City Roeland Park State KS Zip Code 66205

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168734

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Elizabeth Lay
6842 E. Earll Dr.

City Scottsdale State AZ Zip Code 85251

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168735

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 6 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 6 | 0 | 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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address James Tomasic 1514 Beech St | | Transaction ID : SB23-168739 |
| City Braddock | State PA Zip Code 15104 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Eugene Peshette PO Box 2214 | | Transaction ID : SB23-168740 |
| City Citrus Heights | State CA Zip Code 95611 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 100.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Lee Thompson 408 East Ave. | | Transaction ID : SB23-168741 |
| City North Augusta | State SC Zip Code 29841 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 5.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 115.00 |
| |

**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 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)
EMILY's List

A. McCaskill for Missouri

Full Name (Last, First, Middle Initial)

Mailing Address D. Hillier
PO Box 246

City Poulsbo State WA Zip Code 98370

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168745

Amount of Each Disbursement this Period
120.00

B. McCaskill for Missouri

Full Name (Last, First, Middle Initial)

Mailing Address Donna Bruno
9837 Lakemere Dr

City Dallas State TX Zip Code 75238

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168746

Amount of Each Disbursement this Period
20.00

C. McCaskill for Missouri

Full Name (Last, First, Middle Initial)

Mailing Address George Jacklin
5616 W Rita Dr.

City Milwaukee State WI Zip Code 53219

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168747

Amount of Each Disbursement this Period
13.35

SUBTOTAL of Disbursements This Page (optional)..... ▶ 153.35

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Elizabeth Owen
10 Park Drive

City Yalaha State FL Zip Code 34797

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168754

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Carol Warfield
2404 South 3rd Street

City Effingham State IL Zip Code 62401

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168755

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Patricia Barron
525 March Avenue

City Healdsburg State CA Zip Code 95448

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168756

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

120.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Keith Housley
801 S Chester Rd Apt 514

City Swarthmore State PA Zip Code 19081

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168757

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Janet Spence
PO Box 465

City Dennis State MA Zip Code 02638

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168758

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address John MacLeod
46 Red Maple Way

City Cincinnati State OH Zip Code 45246

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168759

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

220.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Abigail Agranat
284 Lafayette Street Apt. 6C

City New York State NY Zip Code 10012

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168769

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Helen Smiler
324 Forest Street

City Oakland State CA Zip Code 94618

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168770

Amount of Each Disbursement this Period

33.33

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Sam Coltrin
PO Box 364

City Penryn State CA Zip Code 95663

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168771

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

153.33

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Karl Pribram
PO Box 679

City Warrenton State VA Zip Code 20188

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | 1 | 1 |

Transaction ID : **SB23-168772**

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 2 | 5 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Christine Luce
100 Walton Street

City Portland State ME Zip Code 04103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | 1 | 1 |

Transaction ID : **SB23-168773**

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 1 | 0 | . | 0 | 0 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Neva Hansen
179 Commercial Street Unit 4

City Provincetown State MA Zip Code 02657

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | 1 | 1 |

Transaction ID : **SB23-168774**

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 2 | 5 | . | 0 | 0 |
|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| | | | | | |
|---|---|---|---|---|---|
| 2 | 8 | 5 | . | 0 | 0 |
|---|---|---|---|---|---|

TOTAL This Period (last page this line number only)..... ▶

| | | | | | |
|---|---|---|---|---|---|
| 2 | 8 | 5 | . | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Katharine Kane
10 Chestnut Street

City Boston State MA Zip Code 02108

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168775

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 1 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Benjamin Hochman
8116 W. Cliff Dr

City Knoxville State TN Zip Code 37909

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168776

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 1 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Karolyn Poynter
7351 Willow Rd. Unit 7

City Frederick State MD Zip Code 21702

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | | | 2 | 0 | 1 | | | |

Transaction ID : SB23-168777

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 2 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | |
|---|---|---|---|---|---|
| 1 | 3 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

| | | | | | |
|---|---|---|---|---|---|
| 1 | 3 | 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 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)
EMILY's List

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Barbara Sacharow 7 E. 14th St. | | Transaction ID : SB23-168778 |
| City New York | State NY | |
| Zip Code 10003 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 10.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Lana Edwards 3206 Palm Drive | | Transaction ID : SB23-168779 |
| City Delray Beach | State FL | |
| Zip Code 33483 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Richard Cornetti 1012 Baxter Dr | | Transaction ID : SB23-168780 |
| City Plano | State TX | |
| Zip Code 75025 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 50.00 |
| 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Wanda Pruitt 3781 S. Creekside Dr | | Transaction ID : SB23-168781 |
| City New Palestine | State IN | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Richard Rubenstein 39 Appaloosa Ln | | Transaction ID : SB23-168782 |
| City Bell Canyon | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 25.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Chloe Davenport 216 NW 70th St. | | Transaction ID : SB23-168783 |
| City Seattle | State WA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 3.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 38.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Jacqueline Fuqua
1228 Rosemont Ave. NW

City Albuquerque State NM Zip Code 87104

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168790

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Mary Garner
7442 Spring Village Drive Apt. 302

City Springfield State VA Zip Code 22150

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168791

Amount of Each Disbursement this Period

66.66

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Barbara Slater
3322 Amelia Run Way

City North Fort Myers State FL Zip Code 33917

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168792

Amount of Each Disbursement this Period

33.33

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

134.99

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address David Eckstein
25 Middlesex Turnpike

City Iselin State NJ Zip Code 08830

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168793**

Amount of Each Disbursement this Period

100.00

B. McCaskill for Missouri

Mailing Address Deborah Mathias
3820 Brentwood Cres.

City Virginia Beach State VA Zip Code 23452

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168794**

Amount of Each Disbursement this Period

5.00

C. McCaskill for Missouri

Mailing Address Carol Andrews
8320 W Cecil Ln

City Homosassa State FL Zip Code 34446

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168795**

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

110.00

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address John McCluhan 2037 Scally Ct. | | Transaction ID : SB23-168796 |
| City Concord | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Joan Saegert 2043 Denmark St | | Transaction ID : SB23-168797 |
| City Clearwater | State FL | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address James Stevenson 13 Westlake Point Dr | | Transaction ID : SB23-168798 |
| City Pinehurst | State NC | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 25.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 65.00 |
| |

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Samuel Schiffman
2704 Carlaris Rd.

City San Marino State CA Zip Code 91108

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168802

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Betty Weaver
3859 Shagbark Ln

City Beavercreek State OH Zip Code 45440

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168803

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Marjon Riekerk
10051 Dibble Ave. NW

City Seattle State WA Zip Code 98177

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168804

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 170.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address David Nolan
305 Elmont Avenue

City Folsom State PA Zip Code 19033

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168805

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Frankie Tester
830 Logan Blvd S

City Naples State FL Zip Code 34119

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168806

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Jay Johnson
66 Ninth Avenue, Apt. 7W

City New York State NY Zip Code 10011

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168807

Amount of Each Disbursement this Period

83.33

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

123.33

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Phyllis Yarnold
2412 Yorktown St., Apt. 280

City Houston State TX Zip Code 77056

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168808**

Amount of Each Disbursement this Period

50.00

B. VAL DEMINGS FOR CONGRESS

Mailing Address Frank Gambetty
2323 7th St. SE, Apt. D205

City Puyallup State WA Zip Code 98374

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168809**

Amount of Each Disbursement this Period

20.00

C. VAL DEMINGS FOR CONGRESS

Mailing Address Carolyn Wiljanen
42 John Alden Road

City Plymouth State MA Zip Code 02360

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168810**

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

75.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Elaine Orlando
11402 Kingstree Ct.

City Spring Hill State FL Zip Code 34609

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : SB23-168811

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Carol Wiley
PO Box 542

City Durango State CO Zip Code 81302

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : SB23-168812

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Audrey Foley
630 W Bonita Ave Apt 2M

City Claremont State CA Zip Code 91711

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : SB23-168813

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 130.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Bernice Jasek
2505 Evergreen Rd. N

City Fargo State ND Zip Code 58102

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168814

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Marita Maxey
1052 W Balmoral Ave., Apt. 2F

City Chicago State IL Zip Code 60640

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168815

Amount of Each Disbursement this Period

| |
|-------|
| 35.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Nancy Hendrickson
PO Box 21344

City Oxnard State CA Zip Code 93034

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168816

Amount of Each Disbursement this Period

| |
|-------|
| 16.66 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 61.66 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Eva Griswold
12107 Gladewick Dr.

City Houston State TX Zip Code 77077

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168817**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Micaela Reddy
6 Reservoir Pl

City Belleville State NJ Zip Code 07109

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168818**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Sondra Langweil
707 Sydney Drive

City Annapolis State MD Zip Code 21401

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168819**

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

70.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Lindsay Richards
204 Beverly Avenue

City Missoula State MT Zip Code 59801

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168820**

Amount of Each Disbursement this Period

66.66

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Hilda Korner
255 South Rengstorff Avenue Apt. 1

City Mountain View State CA Zip Code 94040

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168821**

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Lou Grogan
770 Shelter Bay dr.

City LaConner State WA Zip Code 98257

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168822**

Amount of Each Disbursement this Period

16.66

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

113.32

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Jeannine Walsh
182 Balfour Drive

City Winter Park State FL Zip Code 32792

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168823

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Kathleen Brauge
PO Box 524

City Empire State CO Zip Code 80438

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168824

Amount of Each Disbursement this Period

| |
|------|
| 8.33 |
|------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Bettie Baker
13802 Larchmere Blvd

City Cleveland State OH Zip Code 44120

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168825

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|--------|
| 533.33 |
|--------|

TOTAL This Period (last page this line number only)..... ▶

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| |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Celeste VanMyers
PO Box 46126

City Los Angeles State CA Zip Code 90046

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168826

Amount of Each Disbursement this Period

60.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Kathleen Haydel
1696 Sandyrock Ln.

City San Jose State CA Zip Code 95125

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168827

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Bruce Hellmer
308 Pineknoll Ct

City Brighton State MI Zip Code 48116

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168828

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

105.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Sarah Paulson
1208 Ferdon Rd

City Ann Arbor State MI Zip Code 48104

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | 1 | 1 |

Transaction ID : SB23-168829

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 6 | 6 | . | 6 | 6 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Beth Myers
4070 W Forrest Park DR

City Bloomington State IN Zip Code 47404

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | 1 | 1 |

Transaction ID : SB23-168830

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 5 | 0 | . | 0 | 0 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Barbara Rorinson
3480 Mountain View Ave

City Carmel State CA Zip Code 93923

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | 1 | 1 |

Transaction ID : SB23-168831

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 1 | 6 | . | 6 | 6 |
|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | |
|---|---|---|---|---|---|
| 1 | 3 | 3 | . | 3 | 2 |
|---|---|---|---|---|---|

| | | | | | |
|---|---|---|---|---|---|
| 1 | 3 | 3 | . | 3 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Susan Dreghorn
724 Arlington Ave.

City Naperville State IL Zip Code 60565

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168832

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Alice Yee
1403 N. Brick Road

City Ellensburg State WA Zip Code 98926

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168833

Amount of Each Disbursement this Period

| |
|------|
| 8.33 |
|------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Elizabeth Gallagher
8 Strong PL

City Brooklyn State NY Zip Code 11231

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168834

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 68.33 |
|-------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Jane Harbaugh
720 Maryland Circle

City East Ridge State TN Zip Code 37412

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168835

Amount of Each Disbursement this Period

166.66

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Shari Malloy
2113 Rangeview Lane

City Longmont State CO Zip Code 80501

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168836

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Robert Blue
490 5th St.

City Lakeport State CA Zip Code 95453

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168837

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

206.66

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Nancy Willard
72 Alpine Shores Rd.

City Bryant Pond State ME Zip Code 04219

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168838

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Nancy Lund
306 Xerxes Ave. N

City Minneapolis State MN Zip Code 55405

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168839

Amount of Each Disbursement this Period

40.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Helen Rogers
2205 State St.

City Nashville State TN Zip Code 37203

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168840

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

100.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address **Jacqueline Fuqua**
1228 Rosemont Ave. NW

City **Albuquerque** State **NM** Zip Code **87104**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168844**

Amount of Each Disbursement this Period

| |
|-------|
| 35.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address **Jeanette Cousineau**
3247 Corte Valencia

City **Fairfield** State **CA** Zip Code **94534**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168845**

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address **Sameer Hassan**
935 Vauxhall Street Ext

City **Quaker Hill** State **CT** Zip Code **06375**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168846**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 95.00 |
|-------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Sol Gerstenfeld
802 Irwin St

City Anchorage State AK Zip Code 99508

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-168850**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Andrew Dean
4762 NW 107th Ave Apt 805

City Doral State FL Zip Code 33178

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-168851**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Lou Rhoades
1045 Manono St.

City Hilo State HI Zip Code 96720

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-168852**

Amount of Each Disbursement this Period

| |
|-------|
| 33.33 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 63.33 |
|-------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Sandra Reiff
3478 S Carol Dr.

City Flagstaff State AZ Zip Code 86001

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168853

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Dona Irvin
298 Meadow Ln., Apt. 407

City Poynette State WI Zip Code 53955

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168854

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Karen Emery
4504 New Market Banta Rd.

City Lewisburg State OH Zip Code 45338

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168855

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

40.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address **Charlotte McCarthy**
PO Box 3125

City **Las Cruces** State **NM** Zip Code **88003**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168856

Amount of Each Disbursement this Period

| |
|--------|
| 200.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address **Joan Kim**
1905 Kanola Road

City **La Habra** State **CA** Zip Code **90631**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168857

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address **Gloria Fulcher**
2925 Roanoke Ct

City **Bakersfield** State **CA** Zip Code **93306**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168858

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 250.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Glista Guilford
829 Forest Ave

City Palo Alto State CA Zip Code 94301

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168859

Amount of Each Disbursement this Period

83.35

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Maura Brand
2804 Baccurate Dr

City Marietta State GA Zip Code 30062

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168860

Amount of Each Disbursement this Period

40.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Geraldine Allen
806 Alhambra Court

City Sugar Land State TX Zip Code 77478

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168861

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

173.35

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Susan Graul
6731 Forest Glen Rd

City Pittsburgh State PA Zip Code 15217

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168862

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Karen Adler
2758 Estates Ln.

City Jacksonville State FL Zip Code 32257

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168863

Amount of Each Disbursement this Period

16.66

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Judith Sherman
3671 Oakton Ridge

City Hopkins State MN Zip Code 55305

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168864

Amount of Each Disbursement this Period

12.50

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

49.16

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Helen Safa
2021 NW 15th Avenue

City Gainesville State FL Zip Code 32605

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168865**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Rebekah Mikkelsen
550 Ortega Ave Unit 314

City Mt. View State CA Zip Code 94040

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168866**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Kathleen Lohr
30086 Britt

City Chapel Hill State NC Zip Code 27517

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168867**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

140.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Harte Sousa
PO Box 820

City San Jacinto State CA Zip Code 92581

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168868

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Rebecca Abernathy
1440 Old Campbellsville Rd.

City Pulaski State TN Zip Code 38478

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168869

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address John Light
215 W. 91st Street, Apt. 43

City New York State NY Zip Code 10024

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168870

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
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SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 6 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Sally Rheinfrank
PO Box 310

City Captiva State FL Zip Code 33924

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168871

Amount of Each Disbursement this Period

166.66

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Mignon Davis
10 Stream Valley Court

City Gaithersburg State MD Zip Code 20882

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168872

Amount of Each Disbursement this Period

12.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Roshan Bagga
39 Parkridge Drive

City Bryn Mawr State PA Zip Code 19010

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168873

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

183.66

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address William Fiffer
2640 Summit Drive # 304

City Glenview State IL Zip Code 60025

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168874**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Gretchen McGinley
803 Annan Terrace

City Los Angeles State CA Zip Code 90042

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168875**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Ellen Smith
1469 Dana Avenue

City Palo Alto State CA Zip Code 94301

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168876**

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

95.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Geraldine Clifford
1661 Pine Street Apt. 733

City San Francisco State CA Zip Code 94109

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168877

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Mary Garner
7442 Spring Village Drive Apt. 302

City Springfield State VA Zip Code 22150

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168878

Amount of Each Disbursement this Period

66.66

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address James Mitchell
PO Box 5119

City Irvine State CA Zip Code 92616

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168879

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

616.66

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address **Barbara Slater**
3322 Amelia Run Way

City **North Fort Myers** State **FL** Zip Code **33917**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168880

Amount of Each Disbursement this Period

| |
|-------|
| 33.33 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address **Theresa O'Gorman**
337A Canterbury Court

City **Lakewood** State **NJ** Zip Code **08701**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168881

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address **Flora Wilber**
1 Towers Park Ln Apt 1914

City **San Antonio** State **TX** Zip Code **78209**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168882

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 73.33 |
|-------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Donald Brown
1088 Fern Ln

City Alpena State MI Zip Code 49707

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | 1 | 1 |

Transaction ID : **SB23-168883**

Amount of Each Disbursement this Period

| | | | |
|---|---|---|---|
| 3 | . | 3 | 3 |
|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Warren Roberts
35575 Yosemite Ave

City Davis State CA Zip Code 95616

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | 1 | 1 |

Transaction ID : **SB23-168884**

Amount of Each Disbursement this Period

| | | | |
|---|---|---|---|
| 3 | . | 3 | 3 |
|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address June Kirby
100 Leslie Drive

City Hubert State NC Zip Code 28539

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | 1 | 1 |

Transaction ID : **SB23-168885**

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 1 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| | | | | | |
|---|---|---|---|---|---|
| 1 | 3 | 6 | . | 6 | 6 |
|---|---|---|---|---|---|

TOTAL This Period (last page this line number only)..... ▶

| | | | | | |
|---|---|---|---|---|---|
| 1 | 3 | 6 | . | 6 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address David Eckstein
25 Middlesex Turnpike

City Iselin State NJ Zip Code 08830

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168886

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Monica Morganstein
14-N 880 Lac Du Beatrice

City Dundee State IL Zip Code 60118

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168887

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Irma Howarth
14 S. Oak Circle

City Asheville State NC Zip Code 28806

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168888

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

205.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address **Mary Tedrow**
PO Box 187

City **Groveport** State **OH** Zip Code **43125**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168889

Amount of Each Disbursement this Period

| |
|-------|
| 35.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address **Margaret Wolfe**
4115 Fleet Landing Blvd.

City **Atlantic Beach** State **FL** Zip Code **32233**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168890

Amount of Each Disbursement this Period

| |
|-------|
| 33.33 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address **Deborah Mathias**
3820 Brentwood Cres.

City **Virginia Beach** State **VA** Zip Code **23452**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168891

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 73.33 |
|-------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address William Baxter
5335 Cinnamon Lake Dr

City Baytown State TX Zip Code 77521

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-168895**

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Donna Lennox
93 Goodwin Ave.

City Staten Island State NY Zip Code 10314

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-168896**

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Mary Duran
2192 Lumbre Ct.

City Santa Fe State NM Zip Code 87505

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-168897**

Amount of Each Disbursement this Period

| |
|-------|
| 15.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 140.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Jeffrey Hoke
5506 N Kenmore Ave

City Chicago State IL Zip Code 60640

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168901**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Yvette Dumont
1064 Hanley Ave

City Los Angeles State CA Zip Code 90049

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168902**

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Robert Benson
24 Amber Ln.

City Lafayette State CA Zip Code 94549

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168903**

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

280.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Marilyn Willis
347 Sportsman Rd

City State Zip Code
Murphysboro IL 62966

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168904**

Amount of Each Disbursement this Period

5.00

B. VAL DEMINGS FOR CONGRESS

Mailing Address Eleanor Elliott
15 W. 72nd St., Apt. 9T

City State Zip Code
New York NY 10023

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168905**

Amount of Each Disbursement this Period

20.00

C. VAL DEMINGS FOR CONGRESS

Mailing Address Cynthia McCormack
2657 N. 70th St

City State Zip Code
Waywata WI 53213

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168906**

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

35.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Leonard Bacon
3636 Cavalear Dr

City Toledo State OH Zip Code 43606

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168907

Amount of Each Disbursement this Period

| |
|-------|
| 41.66 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Karen Steele
2322 33rd Ave.

City Astoria State NY Zip Code 11106

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168908

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Marlene Moody
1310 Castlerock Ave Unit 27

City Wenatchee State WA Zip Code 98801

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168909

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 86.66 |
|-------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Catherine Dishion
1030 E. Canon Perdido

City Santa Barbara State CA Zip Code 93103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : **SB23-168910**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Gretchen Davis
5206 W 58th St.

City Roeland Park State KS Zip Code 66205

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : **SB23-168911**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Elizabeth Lay
6842 E. Earll Dr.

City Scottsdale State AZ Zip Code 85251

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : **SB23-168912**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 60.00 |
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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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address **Alene Trachtenberg**
23055 Mariano St.

City **Woodland Hills** State **CA** Zip Code **91367**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168913**

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address **Kathryn Goodwin**
1707 Giles Street

City **Austin** State **TX** Zip Code **78722**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168914**

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address **Martha Graham**
3113 Bluff Ln.

City **Hillsborough** State **NC** Zip Code **27278**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168915**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

40.00

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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address James Tomasic
1514 Beech St

City Braddock State PA Zip Code 15104

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168916**

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Eugene Peshette
PO Box 2214

City Citrus Heights State CA Zip Code 95611

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168917**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Lee Thompson
408 East Ave.

City North Augusta State SC Zip Code 29841

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168918**

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

115.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Trisha Groom
502 N Nelson St

City Bennington State KS Zip Code 67422

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168919**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Virginia Beck-Rhea
159 S 295th Pl

City Federal Way State WA Zip Code 98003

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168920**

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Mary Anderson
4966 W Black Stallion Dr

City Prescott State AZ Zip Code 86305

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168921**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
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| 65.00 |
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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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address D. Hillier
PO Box 246

City Poulsbo State WA Zip Code 98370

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

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|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168922

Amount of Each Disbursement this Period

| |
|--------|
| 120.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Donna Bruno
9837 Lakemere Dr

City Dallas State TX Zip Code 75238

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

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|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168923

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address George Jacklin
5616 W Rita Dr.

City Milwaukee State WI Zip Code 53219

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168924

Amount of Each Disbursement this Period

| |
|-------|
| 13.33 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
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| 153.33 |
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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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Elizabeth Owen
10 Park Drive

City Yalaha State FL Zip Code 34797

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168928

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Patricia Barron
525 March Avenue

City Healdsburg State CA Zip Code 95448

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168929

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Keith Housley
801 S Chester Rd Apt 514

City Swarthmore State PA Zip Code 19081

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168930

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

120.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Janet Spence
PO Box 465

City State Zip Code
Dennis MA 02638

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168931**

Amount of Each Disbursement this Period

| |
|--------|
| 150.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address John MacLeod
46 Red Maple Way

City State Zip Code
Cincinnati OH 45246

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168932**

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Rhoda Weinstein
8060 E Girard Ave Apt 709

City State Zip Code
Denver CO 80231

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-168933**

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
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SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
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| 225.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Judith Ancell
37524 Burton Court

City Farmington State MI Zip Code 48331

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168934**

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Miriam Putterman
18 Wakefield Street

City Hamden State CT Zip Code 06517

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168935**

Amount of Each Disbursement this Period

17.50

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Bonnie Mills
35658 Casa Vista Street

City Yucaipa State CA Zip Code 92399

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168936**

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

52.50

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Ruth Jones
5316 Cribari Gln.

City San Jose State CA Zip Code 95135

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168937

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Carolyn McFarland
4200 Duval Street

City Austin State TX Zip Code 78751

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168938

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Helen Smiler
324 Forest Street

City Oakland State CA Zip Code 94618

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168939

Amount of Each Disbursement this Period

33.33

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

78.33

**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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Sam Coltrin
PO Box 364

City Penryn State CA Zip Code 95663

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168940

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | 2 |

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Christine Luce
100 Walton Street

City Portland State ME Zip Code 04103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168941

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | 0 |

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Benjamin Hochman
8116 W. Cliff Dr

City Knoxville State TN Zip Code 37909

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168942

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | 0 |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 4 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | 0 |

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 0 | 0 | 0 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Karolyn Poynter
7351 Willow Rd. Unit 7

City Frederick State MD Zip Code 21702

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168943

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Barbara Sacharow
7 E. 14th St.

City New York State NY Zip Code 10003

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168944

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Lana Edwards
3206 Palm Drive

City Delray Beach State FL Zip Code 33483

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168945

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

50.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Richard Cornetti
1012 Baxter Dr

City Plano State TX Zip Code 75025

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : SB23-168946

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Wanda Pruitt
3781 S. Creekside Dr

City New Palestine State IN Zip Code 46163

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : SB23-168947

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Richard Rubenstein
39 Appaloosa Ln

City Bell Canyon State CA Zip Code 91307

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : SB23-168948

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 55.00 |
|-------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Chloe Davenport
216 NW 70th St.

City Seattle State WA Zip Code 98117

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168949

Amount of Each Disbursement this Period

| |
|------|
| 3.00 |
|------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Dolores Hillier
PO Box 246

City Poulsbo State WA Zip Code 98370

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168950

Amount of Each Disbursement this Period

| |
|-------|
| 40.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Clare Smith-Larson
1200 5th Ave. SE

City Altoona State IA Zip Code 50009

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-168951

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 53.00 |
|-------|

| |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Nancy Devos
6232 25th St. E

City Ellenton State FL Zip Code 34222

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : **SB23-168952**

Amount of Each Disbursement this Period

40.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Marybelle Suczek
P.O. Box 2411

City South Padre Island State TX Zip Code 78597

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : **SB23-168953**

Amount of Each Disbursement this Period

33.33

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Samuel Schiffman
2704 Carlaris Rd.

City San Marino State CA Zip Code 91108

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : **SB23-168954**

Amount of Each Disbursement this Period

100.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address **Betty Weaver**
3859 Shagbark Ln

Transaction ID : SB23-168955

City **Beavercreek** State **OH** Zip Code **45440**

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address **Marjon Riekerk**
10051 Dibble Ave. NW

Transaction ID : SB23-168956

City **Seattle** State **WA** Zip Code **98177**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address **Beatrice Miller**
2620 Central Street, Apt. 4C

Transaction ID : SB23-168957

City **Evanston** State **IL** Zip Code **60201**

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|--------|
| 120.00 |
|--------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address David Nolan
305 Elmont Avenue

City Folsom State PA Zip Code 19033

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168958**

Amount of Each Disbursement this Period

10.00

B. Tammy Duckworth for Congress

Mailing Address Jay Johnson
66 Ninth Avenue, Apt. 7W

City New York State NY Zip Code 10011

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168959**

Amount of Each Disbursement this Period

83.33

C. Tammy Duckworth for Congress

Mailing Address William Hansell
2785 Shady Lane

City Eureka State CA Zip Code 95501

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168960**

Amount of Each Disbursement this Period

15.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

108.33

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Frank Gambetty
2323 7th St. SE, Apt. D205

City Puyallup State WA Zip Code 98374

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168961

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Carolyn Wiljanen
42 John Alden Road

City Plymouth State MA Zip Code 02360

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168962

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Carol Wiley
PO Box 542

City Durango State CO Zip Code 81302

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168963

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

125.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Audrey Foley
630 W Bonita Ave Apt 2M

City Claremont State CA Zip Code 91711

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : **SB23-168964**

Amount of Each Disbursement this Period

20.00

B. Tammy Duckworth for Congress

Mailing Address Marita Maxey
1052 W Balmoral Ave., Apt. 2F

City Chicago State IL Zip Code 60640

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : **SB23-168965**

Amount of Each Disbursement this Period

35.00

C. Tammy Duckworth for Congress

Mailing Address Nancy Hendrickson
PO Box 21344

City Oxnard State CA Zip Code 93034

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : **SB23-168966**

Amount of Each Disbursement this Period

16.66

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

71.66

**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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Eva Griswold 12107 Gladewick Dr. | | Transaction ID : SB23-168967 |
| City Houston | State TX Zip Code 77077 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Lindsay Richards 204 Beverly Avenue | | Transaction ID : SB23-168968 |
| City Missoula | State MT Zip Code 59801 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 66.70 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Hilda Korner 255 South Rengstorff Avenue Apt. 1 | | Transaction ID : SB23-168969 |
| City Mountain View | State CA Zip Code 94040 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 30.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 116.70 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address Lou Grogan
770 Shelter Bay dr.

Transaction ID : SB23-168970

City LaConner State WA Zip Code 98257

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 9 | 1 | 6 | 6 | 6 |
|---|---|---|---|---|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address Jeannine Walsh
182 Balfour Drive

Transaction ID : SB23-168971

City Winter Park State FL Zip Code 32792

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 2 | 5 | 0 | 0 | 0 |
|---|---|---|---|---|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address Ethel Parker
48 Parker Rd

Transaction ID : SB23-168972

City Fort Shaw State MT Zip Code 59443

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

| | | | | |
|---|---|---|---|---|
| 9 | 1 | 6 | 6 | 6 |
|---|---|---|---|---|

TOTAL This Period (last page this line number only)..... ▶

| | | | | |
|---|---|---|---|---|
| 9 | 1 | 6 | 6 | 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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Kathleen Brauge PO Box 524 | | Transaction ID : SB23-168973 |
| City Empire | State CO | |
| Zip Code 80438 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 8.33 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Florence Cromwell 129 Cantera Circle | | Transaction ID : SB23-168974 |
| City Santa Fe | State NM | |
| Zip Code 87501 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 100.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Bettie Baker 13802 Larchmere Blvd | | Transaction ID : SB23-168975 |
| City Cleveland | State OH | |
| Zip Code 44120 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 500.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 608.33 |
| |

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Celeste VanMyers
PO Box 46126

City Los Angeles State CA Zip Code 90046

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168976

Amount of Each Disbursement this Period

60.00

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Owline Gregory
73477 Feather Trail

City Palm Desert State CA Zip Code 92260

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168977

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Kathleen Haydel
1696 Sandyrock Ln.

City San Jose State CA Zip Code 95125

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-168978

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

130.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Tammy Duckworth for Congress

Mailing Address John Howard
8856 S Emerald Ave

City Chicago State IL Zip Code 60620

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168979**

Amount of Each Disbursement this Period
65.00

Full Name (Last, First, Middle Initial)
B. Tammy Duckworth for Congress

Mailing Address Sarah Paulson
1208 Ferdon Rd

City Ann Arbor State MI Zip Code 48104

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168980**

Amount of Each Disbursement this Period
66.66

Full Name (Last, First, Middle Initial)
C. Tammy Duckworth for Congress

Mailing Address Barbara Rorinson
3480 Mountain View Ave

City Carmel State CA Zip Code 93923

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-168981**

Amount of Each Disbursement this Period
16.66

SUBTOTAL of Disbursements This Page (optional)..... ▶ 148.32

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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Andrea Foley 46 Northampton Avenue | | Transaction ID : SB23-168982 |
| City Berkeley | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Jean Shadrach 3530 Fordham Dr | | Transaction ID : SB23-168983 |
| City Anchorage | State AK | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Suzanne Carr 3129 Pattiz Avenue | | Transaction ID : SB23-168984 |
| City Long Beach | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 5.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 105.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address Susan Dreghorn
724 Arlington Ave.

Transaction ID : SB23-168985

City Naperville State IL Zip Code 60565

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|--|
| |
|--|

Candidate Name

Tammy Duckworth for Congress

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address Jennie Mendelson
7321 South Shore Drive Apt. 5D

Transaction ID : SB23-168986

City Chicago State IL Zip Code 60649

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|--|
| |
|--|

Candidate Name

Tammy Duckworth for Congress

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address Elizabeth Gallagher
8 Strong PL

Transaction ID : SB23-168987

City Brooklyn State NY Zip Code 11231

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|--|
| |
|--|

Candidate Name

Tammy Duckworth for Congress

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 65.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Jane Harbaugh
720 Maryland Circle

City East Ridge State TN Zip Code 37412

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168988

Amount of Each Disbursement this Period

| |
|--------|
| 166.66 |
|--------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Robert Blue
490 5th St.

City Lakeport State CA Zip Code 95453

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168989

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Nancy Willard
72 Alpine Shores Rd.

City Bryant Pond State ME Zip Code 04219

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-168990

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 196.66 |
|--------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Nancy Lund
306 Xerxes Ave. N

City Minneapolis State MN Zip Code 55405

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168991

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 4 | 0 | . | 0 | 0 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Helen Rogers
2205 State St.

City Nashville State TN Zip Code 37203

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168992

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 5 | 0 | . | 0 | 0 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Barbara Borthwick
14500 Fruitvale Ave. Apt. 6149

City Saratoga State CA Zip Code 95070

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-168993

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 1 | 9 | . | 0 | 0 |
|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | |
|---|---|---|---|---|
| 1 | 9 | . | 0 | 0 |
|---|---|---|---|---|

| | | | | |
|---|---|---|---|---|
| 1 | 9 | . | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Lois Laine
1072 Serrano CT

City Lafayette State CA Zip Code 94549

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168994

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address David Varner
8408 Glenann Dr

City North Richland Hil State TX Zip Code 76182

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168995

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Lilian Inai
1744 Krameria St.

City Denver State CO Zip Code 80220

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168996

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

55.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address **Carlton Alexis**
PO Box 305691

City **St Thomas** State **VI** Zip Code **803**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168997

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address **Jeanette Cousineau**
3247 Corte Valencia

City **Fairfield** State **CA** Zip Code **94534**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168998

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address **Sameer Hassan**
935 Vauxhall Street Ext

City **Quaker Hill** State **CT** Zip Code **06375**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-168999

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

160.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Rita Stevens
5249 Windyridge Dr

City Portage State MI Zip Code 49002

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169000

Amount of Each Disbursement this Period

60.00

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Irene Mikkelson
12910 Dorman Road Apt. 3304

City Pineville State NC Zip Code 28134

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169001

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Kathleen Fraser
1936 Leavenworth Street

City San Francisco State CA Zip Code 94133

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169002

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

105.00

**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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Jay Gilden 4232 Childress St | | Transaction ID : SB23-169003 |
| City Houston State TX Zip Code 77005 | Amount of Each Disbursement this Period 10.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Franca Onyeuche 312 E 184th St # 2 | | Transaction ID : SB23-169004 |
| City Bronx State NY Zip Code 10458 | Amount of Each Disbursement this Period 10.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Ina Simon 1511 Carlisle Ln | | Transaction ID : SB23-169005 |
| City Dekalb State IL Zip Code 60115 | Amount of Each Disbursement this Period 30.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 50.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Andrew Dean
4762 NW 107th Ave Apt 805

City Doral State FL Zip Code 33178

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-169006**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Lou Rhoades
1045 Manono St.

City Hilo State HI Zip Code 96720

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-169007**

Amount of Each Disbursement this Period

| |
|-------|
| 33.33 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Karen Emery
4504 New Market Banta Rd.

City Lewisburg State OH Zip Code 45338

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-169008**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 73.33 |
|-------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Charlotte McCarthy
PO Box 3125

City Las Cruces State NM Zip Code 88003

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-169009**

Amount of Each Disbursement this Period

| |
|--------|
| 200.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Gloria Fulcher
2925 Roanoke Ct

City Bakersfield State CA Zip Code 93306

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-169010**

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Glista Guilford
829 Forest Ave

City Palo Alto State CA Zip Code 94301

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-169011**

Amount of Each Disbursement this Period

| |
|-------|
| 83.33 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 308.33 |
|--------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)
A. Tammy Duckworth for Congress

Mailing Address Maura Brand
2804 Baccurate Dr

City Marietta State GA Zip Code 30062

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169012

Amount of Each Disbursement this Period
40.00

Full Name (Last, First, Middle Initial)
B. Tammy Duckworth for Congress

Mailing Address Geraldine Allen
806 Alhambra Court

City Sugar Land State TX Zip Code 77478

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169013

Amount of Each Disbursement this Period
50.00

Full Name (Last, First, Middle Initial)
C. Tammy Duckworth for Congress

Mailing Address Susan Graul
6731 Forest Glen Rd

City Pittsburgh State PA Zip Code 15217

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169014

Amount of Each Disbursement this Period
20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶ 110.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Karen Adler
2758 Estates Ln.

City Jacksonville State FL Zip Code 32257

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169015

Amount of Each Disbursement this Period

16.66

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Judith Sherman
3671 Oakton Ridge

City Hopkins State MN Zip Code 55305

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169016

Amount of Each Disbursement this Period

12.50

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Rebekah Mikkelsen
550 Ortega Ave Unit 314

City Mt. View State CA Zip Code 94040

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169017

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

49.16

**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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Kathleen Lohr 30086 Britt | | Transaction ID : SB23-169018 |
| City Chapel Hill | State NC | |
| Zip Code 27517 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Elaine Koenigsberg 180 E. Pearson # 4905 | | Transaction ID : SB23-169019 |
| City Chicago | State IL | |
| Zip Code 60611 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Tammy Duckworth for Congress | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Harte Sousa PO Box 820 | | Transaction ID : SB23-169020 |
| City San Jacinto | State CA | |
| Zip Code 92581 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 90.00 |
| |

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Sally Rheinfrank
PO Box 310

City Captiva State FL Zip Code 33924

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169021

Amount of Each Disbursement this Period

| |
|--------|
| 166.66 |
|--------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Mignon Davis
10 Stream Valley Court

City Gaithersburg State MD Zip Code 20882

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169022

Amount of Each Disbursement this Period

| |
|-------|
| 12.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Roshan Bagga
39 Parkridge Drive

City Bryn Mawr State PA Zip Code 19010

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169023

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|--------|
| 183.66 |
|--------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address William Fiffer
2640 Summit Drive # 304

City Glenview State IL Zip Code 60025

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-169024

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Gretchen McGinley
803 Annan Terrace

City Los Angeles State CA Zip Code 90042

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-169025

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Geraldine Clifford
1661 Pine Street Apt. 733

City San Francisco State CA Zip Code 94109

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-169026

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

95.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address James Mitchell
PO Box 5119

City Irvine State CA Zip Code 92616

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169027**

Amount of Each Disbursement this Period

500.00

B. Tammy Duckworth for Congress

Mailing Address Flora Wilber
1 Towers Park Ln Apt 1914

City San Antonio State TX Zip Code 78209

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169028**

Amount of Each Disbursement this Period

20.00

C. Tammy Duckworth for Congress

Mailing Address Donald Brown
1088 Fern Ln

City Alpena State MI Zip Code 49707

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169029**

Amount of Each Disbursement this Period

3.33

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

523.33

**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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Peter Debrunner 26900 Molly Dr | | Transaction ID : SB23-169036 |
| City Conifer | State CO | |
| Zip Code 80433 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Dee Birkel PO Box 226 | | Transaction ID : SB23-169037 |
| City Brady | State NE | |
| Zip Code 69123 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Susan Wickersham 1303 E Maplewood Ave | | Transaction ID : SB23-169038 |
| City Bellingham | State WA | |
| Zip Code 98225 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 75.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Margaret Wolfe
4115 Fleet Landing Blvd.

City Atlantic Beach State FL Zip Code 32233

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-169039

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 3 | 3 | . | 3 | 3 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Daryl Pierce
158 Oak Leaf Cir.

City Gloversville State NY Zip Code 12078

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-169040

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 1 | 0 | . | 0 | 0 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Martha Purohit
3900 Little John Rd

City Copperopolis State CA Zip Code 95228

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 1 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-169041

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 5 | 0 | . | 0 | 0 |
|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | |
|---|---|---|---|---|
| 4 | 8 | . | 3 | 3 |
|---|---|---|---|---|

| | | | | |
|---|---|---|---|---|
| 4 | 8 | . | 3 | 3 |
|---|---|---|---|---|

**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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Catherine Thweatt 147 Cedarwood Ln | | Transaction ID : SB23-169042 |
| City Madison | State TN | |
| Zip Code 37115 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Carol Andrews 8320 W Cecil Ln | | Transaction ID : SB23-169043 |
| City Homosassa | State FL | |
| Zip Code 34446 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 5.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Beverly Hall 2707 Bradmoor Way | | Transaction ID : SB23-169044 |
| City Decatur | State GA | |
| Zip Code 30034 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 45.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Mailing Address William Baxter
5335 Cinnamon Lake Dr

Transaction ID : **SB23-169045**

City Baytown State TX Zip Code 77521

Amount of Each Disbursement this Period

| |
|--------|
| 200.00 |
|--------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House Senate President
 Disbursement For: 2012 Primary General Other (specify) ▼
 State: District:

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Mailing Address Donna Lennox
93 Goodwin Ave.

Transaction ID : **SB23-169046**

City Staten Island State NY Zip Code 10314

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House Senate President
 Disbursement For: 2012 Primary General Other (specify) ▼
 State: District:

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Mailing Address Mary Duran
2192 Lumbre Ct.

Transaction ID : **SB23-169047**

City Santa Fe State NM Zip Code 87505

Amount of Each Disbursement this Period

| |
|-------|
| 15.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House Senate President
 Disbursement For: 2012 Primary General Other (specify) ▼
 State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 240.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Jeffrey Hoke
5506 N Kenmore Ave

City Chicago State IL Zip Code 60640

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169051**

Amount of Each Disbursement this Period

250.00

B. Tammy Duckworth for Congress

Mailing Address Yvette Dumont
1064 Hanley Ave

City Los Angeles State CA Zip Code 90049

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169052**

Amount of Each Disbursement this Period

5.00

C. Tammy Duckworth for Congress

Mailing Address Marilyn Willis
347 Sportsman Rd

City Murphysboro State IL Zip Code 62966

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169053**

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

260.00

**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)

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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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Cynthia McCormack 2657 N. 70th St | | Transaction ID : SB23-169054 |
| City Waywatosa | State WI Zip Code 53213 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Karen Steele 2322 33rd Ave. | | Transaction ID : SB23-169055 |
| City Astoria | State NY Zip Code 11106 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Barbara Hero 496 Loop Rd | | Transaction ID : SB23-169056 |
| City Topsham | State ME Zip Code 04086 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

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|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 40.00 |
| 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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address **Marlene Moody**
1310 Castlerock Ave Unit 27

City **Wenatchee** State **WA** Zip Code **98801**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169057**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address **Catherine Dishion**
1030 E. Canon Perdido

City **Santa Barbara** State **CA** Zip Code **93103**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169058**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address **Gretchen Davis**
5206 W 58th St.

City **Roeland Park** State **KS** Zip Code **66205**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169059**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

65.00

**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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Ann Sandlin
1706 Emerald Lake Ct.

City Houston State TX Zip Code 77062

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169060

Amount of Each Disbursement this Period

15.00

B. Tammy Duckworth for Congress

Mailing Address Monika Marjason
365 James Dr.

City Longview State TX Zip Code 75605

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169061

Amount of Each Disbursement this Period

5.00

C. Tammy Duckworth for Congress

Mailing Address Millicent Asari
84 Coelho Way

City Honolulu State HI Zip Code 96817

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169062

Amount of Each Disbursement this Period

30.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

50.00

**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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Elizabeth Lay
6842 E. Earll Dr.

City Scottsdale State AZ Zip Code 85251

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169063

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Alene Trachtenberg
23055 Mariano St.

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169064

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Kathryn Goodwin
1707 Giles Street

City Austin State TX Zip Code 78722

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169065

Amount of Each Disbursement this Period

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|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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| 40.00 |
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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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address **Martha Graham
3113 Bluff Ln.**

Transaction ID : SB23-169066

City **Hillsborough** State **NC** Zip Code **27278**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address **James Tomasic
1514 Beech St**

Transaction ID : SB23-169067

City **Braddock** State **PA** Zip Code **15104**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address **Eugene Peshette
PO Box 2214**

Transaction ID : SB23-169068

City **Citrus Heights** State **CA** Zip Code **95611**

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

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| 130.00 |
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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)

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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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Lee Thompson 408 East Ave. | | Transaction ID : SB23-169069 |
| City North Augusta | State SC | |
| Zip Code 29841 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 5.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Trisha Groom 502 N Nelson St | | Transaction ID : SB23-169070 |
| City Bennington | State KS | |
| Zip Code 67422 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Virginia Beck-Rhea 159 S 295th Pl | | Transaction ID : SB23-169071 |
| City Federal Way | State WA | |
| Zip Code 98003 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 50.00 |
| |

**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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Donna Bruno
9837 Lakemere Dr

City Dallas State TX Zip Code 75238

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169072

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address George Jacklin
5616 W Rita Dr.

City Milwaukee State WI Zip Code 53219

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169073

Amount of Each Disbursement this Period

| |
|-------|
| 13.33 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Martha Binford
108 Horner Street

City Belen State NM Zip Code 87002

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169074

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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|-------|
| 53.33 |
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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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address Rosemary Wong
10 Crystal Springs Road Unit 1501

Transaction ID : SB23-169075

City San Mateo State CA Zip Code 94402

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address Hilma Unterberger
80Seminary Ave Apt. 362

Transaction ID : SB23-169076

City Auburndale State MA Zip Code 02466

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address Milton Podolsky
180 East Pearson, Apt 3606

Transaction ID : SB23-169077

City Chicago State IL Zip Code 60611

Amount of Each Disbursement this Period

| |
|--------|
| 400.00 |
|--------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

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| 550.00 |
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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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address Elizabeth Owen
10 Park Drive

Transaction ID : SB23-169078

City Yalaha State FL Zip Code 34797

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address Carol Warfield
2404 South 3rd Street

Transaction ID : SB23-169079

City Effingham State IL Zip Code 62401

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address Keith Housley
801 S Chester Rd Apt 514

Transaction ID : SB23-169080

City Swarthmore State PA Zip Code 19081

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 95.00 |
|-------|

TOTAL This Period (last page this line number only)..... ▶

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| |
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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)
EMILY's List

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Janet Spence PO Box 465 | | Transaction ID : SB23-169081 |
| City Dennis | State MA | |
| Zip Code 02638 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 150.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address John MacLeod 46 Red Maple Way | | Transaction ID : SB23-169082 |
| City Cincinnati | State OH | |
| Zip Code 45246 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Judith Ancell 37524 Burton Court | | Transaction ID : SB23-169083 |
| City Farmington | State MI | |
| Zip Code 48331 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 30.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 230.00 |
| |

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address **Mary Reale**
Girl Zone 110 Central Avenue

City **S. Burlington** State **VT** Zip Code **05403**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169084

Amount of Each Disbursement this Period

| |
|-------|
| 75.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address **Maxine Hirsch**
1382 Newtown Langhorne Road

City **Newtown** State **PA** Zip Code **18940**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169085

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address **Bonnie Mills**
35658 Casa Vista Street

City **Yucaipa** State **CA** Zip Code **92399**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169086

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 130.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Semih Erhan
2301 Cherry St Apt 12B

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169087

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Carolyn McFarland
4200 Duval Street

City Austin State TX Zip Code 78751

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169088

Amount of Each Disbursement this Period

| |
|-------|
| 15.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Helen Smiler
324 Forest Street

City Oakland State CA Zip Code 94618

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169089

Amount of Each Disbursement this Period

| |
|-------|
| 33.33 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 73.33 |
|-------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address Sam Coltrin
PO Box 364

Transaction ID : SB23-169090

City Penryn State CA Zip Code 95663

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address Christine Luce
100 Walton Street

Transaction ID : SB23-169091

City Portland State ME Zip Code 04103

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Mailing Address Claude Pruett
2615 W 20th St

Transaction ID : SB23-169092

City Plainview State TX Zip Code 79072

Amount of Each Disbursement this Period

| |
|------|
| 1.00 |
|------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 31.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Dorothy Robertson
338 S Bedford St.

City Georgetown State DE Zip Code 19947

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169093**

Amount of Each Disbursement this Period

60.00

B. Tammy Duckworth for Congress

Mailing Address Katharine Kane
10 Chestnut Street

City Boston State MA Zip Code 02108

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169094**

Amount of Each Disbursement this Period

100.00

C. Tammy Duckworth for Congress

Mailing Address Benjamin Hochman
8116 W. Cliff Dr

City Knoxville State TN Zip Code 37909

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169095**

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

170.00

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Karolyn Poynter 7351 Willow Rd. Unit 7 | | Transaction ID : SB23-169096 |
| City Frederick | State MD | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Sueo Yamashita 94-354 Kipou St | | Transaction ID : SB23-169097 |
| City Waipahu | State HI | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 100.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Barbara Sacharow 7 E. 14th St. | | Transaction ID : SB23-169098 |
| City New York | State NY | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 130.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Lana Edwards
3206 Palm Drive

City Delray Beach State FL Zip Code 33483

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169099

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Richard Cornetti
1012 Baxter Dr

City Plano State TX Zip Code 75025

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169100

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Wanda Pruitt
3781 S. Creekside Dr

City New Palestine State IN Zip Code 46163

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169101

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 50.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Chloe Davenport
216 NW 70th St.

City Seattle State WA Zip Code 98117

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169102

Amount of Each Disbursement this Period

3.00

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Clare Smith-Larson
1200 5th Ave. SE

City Altoona State IA Zip Code 50009

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169103

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Nancy Devos
6232 25th St. E

City Ellenton State FL Zip Code 34222

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169104

Amount of Each Disbursement this Period

40.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

53.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Myra Gable
1210 Colby Dr.

City Davis State CA Zip Code 95616

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169105**

Amount of Each Disbursement this Period

50.00

B. Tammy Duckworth for Congress

Mailing Address Marybelle Suczek
P.O. Box 2411

City South Padre Island State TX Zip Code 78597

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169106**

Amount of Each Disbursement this Period

33.33

C. Tammy Duckworth for Congress

Mailing Address Frankie Tester
830 Logan Blvd S

City Naples State FL Zip Code 34119

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169107**

Amount of Each Disbursement this Period

30.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

113.33

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Phyllis Yarnold
2412 Yorktown St., Apt. 280

City Houston State TX Zip Code 77056

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169108

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Carol Payne
22 S Buchanan Ave Apt 209 Apt. 209

City Wenatchee State WA Zip Code 98801

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169109

Amount of Each Disbursement this Period

8.00

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Micaela Reddy
6 Reservoir Pl

City Belleville State NJ Zip Code 07109

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169110

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

83.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address **Sondra Langweil**
707 Sydney Drive

City **Annapolis** State **MD** Zip Code **21401**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-169111

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address **Bruce Hellmer**
308 Pineknoll Ct

City **Brighton** State **MI** Zip Code **48116**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-169112

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address **Alice Yee**
1403 N. Brick Road

City **Ellensburg** State **WA** Zip Code **98926**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-169113

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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Sol Gerstenfeld
802 Irwin St

City Anchorage State AK Zip Code 99508

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169114

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Joan Kim
1905 Kanola Road

City La Habra State CA Zip Code 90631

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169115

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Harte Sousa
PO Box 820

City San Jacinto State CA Zip Code 92581

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169116

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 55.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address John Light
215 W. 91st Street, Apt. 43

City New York State NY Zip Code 10024

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-169117

Amount of Each Disbursement this Period

20.00

B. Tammy Duckworth for Congress

Mailing Address Mary Garner
7442 Spring Village Drive Apt. 302

City Springfield State VA Zip Code 22150

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-169118

Amount of Each Disbursement this Period

66.70

C. Tammy Duckworth for Congress

Mailing Address Barbara Slater
3322 Amelia Run Way

City North Fort Myers State FL Zip Code 33917

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-169119

Amount of Each Disbursement this Period

33.33

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

120.03

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Theresa O'Gorman
337A Canterbury Court

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169120

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Deborah Mathias
3820 Brentwood Cres.

City Virginia Beach State VA Zip Code 23452

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169121

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Paul Westmoore
5670 E River Rd

City Grand Island State NY Zip Code 14072

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169122

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

30.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Kathleen Nieves
226 Holland Ave.

City Medford State NY Zip Code 11763

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169123

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Jacqueline Fuqua
1228 Rosemont Ave. NW

City Albuquerque State NM Zip Code 87104

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169124

Amount of Each Disbursement this Period

| |
|-------|
| 35.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Joan Saegert
2043 Denmark St

City Clearwater State FL Zip Code 33763

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169125

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 65.00 |
|-------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Robert Benson
24 Amber Ln.

City Lafayette State CA Zip Code 94549

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-169126**

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Leonard Bacon
3636 Cavalear Dr

City Toledo State OH Zip Code 43606

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-169127**

Amount of Each Disbursement this Period

| |
|-------|
| 41.70 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address D. Hillier
PO Box 246

City Poulsbo State WA Zip Code 98370

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-169128**

Amount of Each Disbursement this Period

| |
|--------|
| 120.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 186.70 |
|--------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Richard Rubenstein
39 Appaloosa Ln

City Bell Canyon State CA Zip Code 91307

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-169132**

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Dolores Hillier
PO Box 246

City Poulsbo State WA Zip Code 98370

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-169133**

Amount of Each Disbursement this Period

| |
|-------|
| 40.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Feinstein for Senate

Mailing Address Elaine Nelson
284 Sunset Blvd.

City Port Townsend State WA Zip Code 98368

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : **SB23-169134**

Amount of Each Disbursement this Period

| |
|-------|
| 12.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 77.00 |
|-------|

TOTAL This Period (last page this line number only)..... ▶

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| |
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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 |

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. Feinstein for Senate | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Susan Ralston 35 East 75 Street Apt. 4E | | Transaction ID : SB23-169135 |
| City New York | State NY | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 100.00 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Feinstein for Senate | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Cathy Cappetta 11177 Shadow Ct | | Transaction ID : SB23-169136 |
| City Auburn | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | 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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Lois Frankel for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address William Hansell 2785 Shady Lane | | Transaction ID : SB23-169138 |
| City Eureka | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 15.00 |
| Candidate Name Lois Frankel for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 140.00 |
| 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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Lois Frankel for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Harte Sousa PO Box 820 | | Transaction ID : SB23-169139 |
| City San Jacinto | State CA Zip Code 92581 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Lois Frankel for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Lois Frankel for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Paul Westmoore 5670 E River Rd | | Transaction ID : SB23-169140 |
| City Grand Island | State NY Zip Code 14072 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 5.00 |
| Candidate Name Lois Frankel for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Mazie Hirono | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address William Hansell 2785 Shady Lane | | Transaction ID : SB23-169141 |
| City Eureka | State CA Zip Code 95501 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 15.00 |
| Candidate Name Friends of Mazie Hirono | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 40.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Mazie Hirono

Mailing Address Harte Sousa
PO Box 820

City San Jacinto State CA Zip Code 92581

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Mazie Hirono

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-169142**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Friends of Mazie Hirono

Mailing Address Paul Westmoore
5670 E River Rd

City Grand Island State NY Zip Code 14072

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Mazie Hirono

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-169143**

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Full Name (Last, First, Middle Initial)

C. Friends of Mazie Hirono

Mailing Address Dorothy Robertson
338 S Bedford St.

City Georgetown State DE Zip Code 19947

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Mazie Hirono

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : **SB23-169144**

Amount of Each Disbursement this Period

| |
|-------|
| 60.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 85.00 |
|-------|

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| |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Kirkpatrick for Congress

Mailing Address William Hansell
2785 Shady Lane

City State Zip Code
Eureka CA 95501

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Kirkpatrick for Congress

Office Sought: House Senate President
 Disbursement For: 2012 Primary General Other (specify) ▼
 State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169145

Amount of Each Disbursement this Period

| |
|-------|
| 40.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Kirkpatrick for Congress

Mailing Address Harte Sousa
PO Box 820

City State Zip Code
San Jacinto CA 92581

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Kirkpatrick for Congress

Office Sought: House Senate President
 Disbursement For: 2012 Primary General Other (specify) ▼
 State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169146

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Kirkpatrick for Congress

Mailing Address Paul Westmoore
5670 E River Rd

City State Zip Code
Grand Island NY 14072

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Kirkpatrick for Congress

Office Sought: House Senate President
 Disbursement For: 2012 Primary General Other (specify) ▼
 State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169147

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 40.00 |
|-------|

| |
|-------|
| 40.00 |
|-------|

**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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Klobuchar for Minnesota | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Francine Freedman 900 North Stuart St | | Transaction ID : SB23-169148 |
| City Arlington | State VA | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 15.00 |
| Candidate Name Klobuchar for Minnesota | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Klobuchar for Minnesota | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Susan Ralston 35 East 75 Street Apt. 4E | | Transaction ID : SB23-169149 |
| City New York | State NY | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 100.00 |
| Candidate Name Klobuchar for Minnesota | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Klobuchar for Minnesota | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Cathy Cappetta 11177 Shadow Ct | | Transaction ID : SB23-169150 |
| City Auburn | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Klobuchar for Minnesota | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 140.00 |
| 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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Klobuchar for Minnesota | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Lisa Nentl-Bloom 6129 Sioux Trail | | Transaction ID : SB23-169151 |
| City North Branch State MN Zip Code 55056 | Amount of Each Disbursement this Period 50.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Klobuchar for Minnesota | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Klobuchar for Minnesota | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Karen Jakes 520 E. 86th St., Apt. 13C Apt. 13- | | Transaction ID : SB23-169152 |
| City New York State NY Zip Code 10028 | Amount of Each Disbursement this Period 250.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Klobuchar for Minnesota | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Anne McLane Kuster for Congress | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address William Hansell 2785 Shady Lane | | Transaction ID : SB23-169154 |
| City Eureka State CA Zip Code 95501 | Amount of Each Disbursement this Period 15.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Anne McLane Kuster for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 315.00 |
| 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Christie Vilsack for Iowa | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address William Hansell 2785 Shady Lane | | Transaction ID : SB23-169158 |
| City Eureka | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 15.00 |
| Candidate Name Christie Vilsack for Iowa | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Christie Vilsack for Iowa | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Harte Sousa PO Box 820 | | Transaction ID : SB23-169159 |
| City San Jacinto | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Christie Vilsack for Iowa | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Christie Vilsack for Iowa | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Paul Westmoore 5670 E River Rd | | Transaction ID : SB23-169160 |
| City Grand Island | State NY | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 5.00 |
| Candidate Name Christie Vilsack for Iowa | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 40.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Samuel Schiffman
2704 Carlaris Rd.

City San Marino State CA Zip Code 91108

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169161

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Betty Weaver
3859 Shagbark Ln

City Beavercreek State OH Zip Code 45440

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169162

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Marjon Riekerk
10051 Dibble Ave. NW

City Seattle State WA Zip Code 98177

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169163

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

170.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address **Beatrice Miller**
2620 Central Street, Apt. 4C

City **Evanston** State **IL** Zip Code **60201**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169164

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address **David Nolan**
305 Elmont Avenue

City **Folsom** State **PA** Zip Code **19033**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169165

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address **Frankie Tester**
830 Logan Blvd S

City **Naples** State **FL** Zip Code **34119**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169166

Amount of Each Disbursement this Period

| |
|-------|
| 30.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 90.00 |
|-------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Jay Johnson
66 Ninth Avenue, Apt. 7W

City New York State NY Zip Code 10011

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169167

Amount of Each Disbursement this Period

83.33

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Phyllis Yarnold
2412 Yorktown St., Apt. 280

City Houston State TX Zip Code 77056

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169168

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Ann Langer
693 NW 38th Terrace

City Deerfield Beach State FL Zip Code 33442

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169169

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

143.33

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Frank Gambetty
2323 7th St. SE, Apt. D205

City Puyallup State WA Zip Code 98374

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169170

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Carolyn Wiljanen
42 John Alden Road

City Plymouth State MA Zip Code 02360

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169171

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Elaine Orlando
11402 Kingstree Ct.

City Spring Hill State FL Zip Code 34609

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169172

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

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|-------|
| 35.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Carol Wiley
PO Box 542

City Durango State CO Zip Code 81302

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169173

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Audrey Foley
630 W Bonita Ave Apt 2M

City Claremont State CA Zip Code 91711

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169174

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Bernice Jasek
2505 Evergreen Rd. N

City Fargo State ND Zip Code 58102

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169175

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|--------|
| 130.00 |
|--------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Marita Maxey
1052 W Balmoral Ave., Apt. 2F

City Chicago State IL Zip Code 60640

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169176

Amount of Each Disbursement this Period

| |
|-------|
| 35.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Nancy Hendrickson
PO Box 21344

City Oxnard State CA Zip Code 93034

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169177

Amount of Each Disbursement this Period

| |
|-------|
| 16.66 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Eva Griswold
12107 Gladewick Dr.

City Houston State TX Zip Code 77077

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169178

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 71.66 |
|-------|

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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Micaela Reddy 6 Reservoir Pl | | Transaction ID : SB23-169179 |
| City Belleville | State NJ | |
| Zip Code 07109 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Elizabeth for MA Inc | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Sondra Langweil 707 Sydney Drive | | Transaction ID : SB23-169180 |
| City Annapolis | State MD | |
| Zip Code 21401 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Elizabeth for MA Inc | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Lindsay Richards 204 Beverly Avenue | | Transaction ID : SB23-169181 |
| City Missoula | State MT | |
| Zip Code 59801 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 66.66 |
| Candidate Name Elizabeth for MA Inc | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... ▶ | 116.66 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Hilda Korner
255 South Rengstorff Avenue Apt. 1

City Mountain View State CA Zip Code 94040

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169182

Amount of Each Disbursement this Period

| |
|-------|
| 30.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Lou Grogan
770 Shelter Bay dr.

City LaConner State WA Zip Code 98257

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169183

Amount of Each Disbursement this Period

| |
|-------|
| 16.66 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Carol Getz
1800 N Bayshore Dr Apt 2515

City Miami State FL Zip Code 33132

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169184

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 71.66 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Jeannine Walsh
182 Balfour Drive

City Winter Park State FL Zip Code 32792

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169185

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Ethel Parker
48 Parker Rd

City Fort Shaw State MT Zip Code 59443

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169186

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Kathleen Brauge
PO Box 524

City Empire State CO Zip Code 80438

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169187

Amount of Each Disbursement this Period

| |
|------|
| 8.33 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 83.33 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Florence Cromwell
129 Cantera Circle

City Santa Fe State NM Zip Code 87501

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169188

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Bettie Baker
13802 Larchmere Blvd

City Cleveland State OH Zip Code 44120

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169189

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Celeste VanMyers
PO Box 46126

City Los Angeles State CA Zip Code 90046

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169190

Amount of Each Disbursement this Period

60.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

660.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address **Anitta Cancell**
236 Glen Avenue

City **Millburn** State **NJ** Zip Code **07041**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169191

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address **Kathleen Haydel**
1696 Sandyrock Ln.

City **San Jose** State **CA** Zip Code **95125**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169192

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address **John Howard**
8856 S Emerald Ave

City **Chicago** State **IL** Zip Code **60620**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169193

Amount of Each Disbursement this Period

| |
|-------|
| 65.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 185.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address **Bruce Hellmer**
308 Pineknoll Ct

City **Brighton** State **MI** Zip Code **48116**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169194

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address **Sarah Paulson**
1208 Ferdon Rd

City **Ann Arbor** State **MI** Zip Code **48104**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169195

Amount of Each Disbursement this Period

66.66

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address **Beth Myers**
4070 W Forrest Park DR

City **Bloomington** State **IN** Zip Code **47404**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169196

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

191.66

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Barbara Rinonson
3480 Mountain View Ave

City Carmel State CA Zip Code 93923

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169197

Amount of Each Disbursement this Period

| |
|-------|
| 16.70 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Andrea Foley
46 Northampton Avenue

City Berkeley State CA Zip Code 94707

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169198

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Jean Shadrach
3530 Fordham Dr

City Anchorage State AK Zip Code 99508

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169199

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|--------|
| 116.70 |
|--------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Susan Dreghorn
724 Arlington Ave.

City Naperville State IL Zip Code 60565

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-169200

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Alice Yee
1403 N. Brick Road

City Ellensburg State WA Zip Code 98926

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-169201

Amount of Each Disbursement this Period

8.33

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Elizabeth Gallagher
8 Strong PL

City Brooklyn State NY Zip Code 11231

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-169202

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

68.33

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Margaret Langmuir
9 Bentbrook Road

City Sudbury State MA Zip Code 01776

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169203

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Jane Harbaugh
720 Maryland Circle

City East Ridge State TN Zip Code 37412

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169204

Amount of Each Disbursement this Period

| |
|--------|
| 166.66 |
|--------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Shari Malloy
2113 Rangeview Lane

City Longmont State CO Zip Code 80501

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169205

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 211.66 |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Helen Rogers
2205 State St.

City Nashville State TN Zip Code 37203

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169209

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address William Baxter
5335 Cinnamon Lake Dr

City Baytown State TX Zip Code 77521

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169210

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Barbara Borthwick
14500 Fruitvale Ave. Apt. 6149

City Saratoga State CA Zip Code 95070

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169211

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

450.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address David Varner
8408 Glenann Dr

City North Richland Hill State TX Zip Code 76182

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169212

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Lilian Inai
1744 Krameria St.

City Denver State CO Zip Code 80220

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169213

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Carlton Alexis
PO Box 305691

City St Thomas State VI Zip Code 803

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169214

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|--------|
| 130.00 |
|--------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Irene Mikkelson
12910 Dorman Road Apt. 3304

City Pineville State NC Zip Code 28134

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169218

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Kathleen Fraser
1936 Leavenworth Street

City San Francisco State CA Zip Code 94133

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169219

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Sally Frances
173 Hicks St. Office Suite

City Brooklyn State NY Zip Code 11201

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169220

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 70.00 |
|-------|

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| |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Jay Gilden
4232 Childress St

City Houston State TX Zip Code 77005

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169221

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Sol Gerstenfeld
802 Irwin St

City Anchorage State AK Zip Code 99508

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169222

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Andrew Dean
4762 NW 107th Ave Apt 805

City Doral State FL Zip Code 33178

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169223

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 40.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Lou Rhoades
1045 Manono St.

City Hilo State HI Zip Code 96720

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-169224

Amount of Each Disbursement this Period

33.35

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Sandra Reiff
3478 S Carol Dr.

City Flagstaff State AZ Zip Code 86001

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-169225

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Dona Irvin
298 Meadow Ln., Apt. 407

City Poynette State WI Zip Code 53955

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-169226

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

53.35

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Karen Emery
4504 New Market Banta Rd.

City Lewisburg State OH Zip Code 45338

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169227**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Charlotte McCarthy
PO Box 3125

City Las Cruces State NM Zip Code 88003

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169228**

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Joan Kim
1905 Kanola Road

City La Habra State CA Zip Code 90631

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169229**

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

245.00

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Gloria Fulcher 2925 Roanoke Ct | | Transaction ID : SB23-169230 |
| City Bakersfield | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Glista Guilford 829 Forest Ave | | Transaction ID : SB23-169231 |
| City Palo Alto | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 83.33 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Maura Brand 2804 Baccurate Dr | | Transaction ID : SB23-169232 |
| City Marietta | State GA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 40.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 148.33 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Geraldine Allen
806 Alhambra Court

City Sugar Land State TX Zip Code 77478

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169233

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Susan Graul
6731 Forest Glen Rd

City Pittsburgh State PA Zip Code 15217

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169234

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Karen Adler
2758 Estates Ln.

City Jacksonville State FL Zip Code 32257

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169235

Amount of Each Disbursement this Period

16.66

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

86.66

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Judith Sherman
3671 Oakton Ridge

City Hopkins State MN Zip Code 55305

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169236

Amount of Each Disbursement this Period

| |
|-------|
| 12.50 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Helen Safa
2021 NW 15th Avenue

City Gainesville State FL Zip Code 32605

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169237

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Rebekah Mikkelsen
550 Ortega Ave Unit 314

City Mt. View State CA Zip Code 94040

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169238

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 132.50 |
|--------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Kathleen Lohr
30086 Britt

City Chapel Hill State NC Zip Code 27517

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169239

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Elaine Koenigsberg
180 E. Pearson # 4905

City Chicago State IL Zip Code 60611

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169240

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Lorna Post
12708 Running Brook Dr

City Clarksburg State MD Zip Code 20871

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169241

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 170.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address **Harte Sousa**
PO Box 820

City **San Jacinto** State **CA** Zip Code **92581**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169242

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address **John Light**
215 W. 91st Street, Apt. 43

City **New York** State **NY** Zip Code **10024**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169243

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address **Sally Rheinfrank**
PO Box 310

City **Captiva** State **FL** Zip Code **33924**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169244

Amount of Each Disbursement this Period

| |
|--------|
| 166.66 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 206.66 |
|--------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Mignon Davis
10 Stream Valley Court

City Gaithersburg State MD Zip Code 20882

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169245

Amount of Each Disbursement this Period

| |
|-------|
| 12.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Roshan Bagga
39 Parkridge Drive

City Bryn Mawr State PA Zip Code 19010

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169246

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address William Fiffer
2640 Summit Drive # 304

City Glenview State IL Zip Code 60025

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169247

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 42.00 |
|-------|

TOTAL This Period (last page this line number only)..... ▶

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| |
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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 |

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 for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Gretchen McGinley 803 Annan Terrace | | Transaction ID : SB23-169248 |
| City Los Angeles | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Ellen Smith 1469 Dana Avenue | | Transaction ID : SB23-169249 |
| City Palo Alto | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Geraldine Clifford 1661 Pine Street Apt. 733 | | Transaction ID : SB23-169250 |
| City San Francisco | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 120.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Theresa O'Gorman
337A Canterbury Court

City Lakewood State NJ Zip Code 08701

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169254

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Bertram Spiller
129 Random Road

City Fairfield State CT Zip Code 06825

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169255

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Lois Hibbard
2600 S Heritage Woods Drive

City Appleton State WI Zip Code 54915

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169256

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

50.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Flora Wilber
1 Towers Park Ln Apt 1914

City San Antonio State TX Zip Code 78209

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169257

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Donald Brown
1088 Fern Ln

City Alpena State MI Zip Code 49707

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169258

Amount of Each Disbursement this Period

| |
|------|
| 3.33 |
|------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Warren Roberts
35575 Yosemite Ave

City Davis State CA Zip Code 95616

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169259

Amount of Each Disbursement this Period

| |
|-------|
| 33.33 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 56.66 |
|-------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address June Kirby
100 Leslie Drive

City Hubert State NC Zip Code 28539

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169260

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address David Eckstein
25 Middlesex Turnpike

City Iselin State NJ Zip Code 08830

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169261

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Monica Morganstein
14-N 880 Lac Du Beatrice

City Dundee State IL Zip Code 60118

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169262

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 300.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Irma Howarth
14 S. Oak Circle

City Asheville State NC Zip Code 28806

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169263

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Edie Williams
1869 Sabal Palm Drive

City Edgewater State FL Zip Code 32141

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169264

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Mary Tedrow
PO Box 187

City Groveport State OH Zip Code 43125

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169265

Amount of Each Disbursement this Period

35.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

140.00

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Emily Curtin 4333 E. Strawberry Drive | | Transaction ID : SB23-169266 |
| City Gilbert | State AZ | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 5.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Judith Mitchels 1757 S Proctor St | | Transaction ID : SB23-169267 |
| City Tacoma | State WA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 5.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Dee Birkel PO Box 226 | | Transaction ID : SB23-169268 |
| City Brady | State NE | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

35.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Margaret Wolfe
4115 Fleet Landing Blvd.

City Atlantic Beach State FL Zip Code 32233

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House Senate President

State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169269

Amount of Each Disbursement this Period

| |
|-------|
| 33.33 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Deborah Mathias
3820 Brentwood Cres.

City Virginia Beach State VA Zip Code 23452

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House Senate President

State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169270

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Daryl Pierce
158 Oak Leaf Cir.

City Gloversville State NY Zip Code 12078

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House Senate President

State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169271

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 48.33 |
|-------|

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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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Marion Sussman 3249 W. 65th Street | | Transaction ID : SB23-169272 |
| City Chicago | State IL | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 15.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Martha Purohit 3900 Little John Rd | | Transaction ID : SB23-169273 |
| City Copperopolis | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 5.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Catherine Thweatt 147 Cedarwood Ln | | Transaction ID : SB23-169274 |
| City Madison | State TN | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 40.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Carol Andrews
8320 W Cecil Ln

City Homosassa State FL Zip Code 34446

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169275

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Kathleen Nieves
226 Holland Ave.

City Medford State NY Zip Code 11763

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169276

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Beverly Hall
2707 Bradmoor Way

City Decatur State GA Zip Code 30034

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169277

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 35.00 |
|-------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Donna Lennox
93 Goodwin Ave.

City Staten Island State NY Zip Code 10314

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169278

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Mary Duran
2192 Lumbre Ct.

City Santa Fe State NM Zip Code 87505

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169279

Amount of Each Disbursement this Period

| |
|-------|
| 15.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Jane Penne-Morse
1319 Clear Crest Circle

City Vista State CA Zip Code 92084

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169280

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Dean Oyer 10910 W Boswell Blvd. | | Transaction ID : SB23-169281 |
| City Sun City | State AZ | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Mary Baniak 1327 Ridgeway Ave | | Transaction ID : SB23-169282 |
| City Munster | State IN | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Sally Strand 11931 54th Ave N | | Transaction ID : SB23-169283 |
| City Minneapolis | State MN | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 125.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address John McCluhan
2037 Scally Ct.

City State Zip Code
Concord CA 94518

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169284

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Joan Saegert
2043 Denmark St

City State Zip Code
Clearwater FL 33763

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169285

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Jeffrey Hoke
5506 N Kenmore Ave

City State Zip Code
Chicago IL 60640

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169286

Amount of Each Disbursement this Period

| |
|--------|
| 250.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 290.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address James Stevenson
13 Westlake Point Dr

City Pinehurst State NC Zip Code 28374

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169287

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Yvette Dumont
1064 Hanley Ave

City Los Angeles State CA Zip Code 90049

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169288

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Carol McCaslin
2300 NE Barry Rd.

City Kansas City State MO Zip Code 64155

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169289

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 55.00 |
|-------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Warren Martin
PO Box 190

City Honey Brook State PA Zip Code 19344

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169293

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Eleanor Elliott
15 W. 72nd St., Apt. 9T

City New York State NY Zip Code 10023

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169294

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Cynthia McCormack
2657 N. 70th St

City Waywataosa State WI Zip Code 53213

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169295

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 80.00 |
|-------|

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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Leonard Bacon 3636 Cavalear Dr | | Transaction ID : SB23-169296 |
| City Toledo | State OH Zip Code 43606 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 41.66 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Martha Kester 228 S. Maple Avenue, Apt. F | | Transaction ID : SB23-169297 |
| City Oak Park | State IL Zip Code 60302 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 100.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Karen Steele 2322 33rd Ave. | | Transaction ID : SB23-169298 |
| City Astoria | State NY Zip Code 11106 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 161.66 |
| |

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Marlene Moody 1310 Castlerock Ave Unit 27 | | Transaction ID : SB23-169299 |
| City Wenatchee | State WA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Vemella Hennington 59 London Dr | | Transaction ID : SB23-169300 |
| City Bella Vista | State AR | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Catherine Dishion 1030 E. Canon Perdido | | Transaction ID : SB23-169301 |
| City Santa Barbara | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 55.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Gretchen Davis
5206 W 58th St.

City Roeland Park State KS Zip Code 66205

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169302

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Ann Sandlin
1706 Emerald Lake Ct.

City Houston State TX Zip Code 77062

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169303

Amount of Each Disbursement this Period

| |
|-------|
| 15.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Millicent Asari
84 Coelho Way

City Honolulu State HI Zip Code 96817

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169304

Amount of Each Disbursement this Period

| |
|-------|
| 30.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 65.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Elizabeth Lay
6842 E. Earll Dr.

City Scottsdale State AZ Zip Code 85251

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169305

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Alene Trachtenberg
23055 Mariano St.

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169306

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Kathryn Goodwin
1707 Giles Street

City Austin State TX Zip Code 78722

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169307

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

40.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address **Martha Graham
3113 Bluff Ln.**

City **Hillsborough** State **NC** Zip Code **27278**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB23-169308

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address **James Tomasic
1514 Beech St**

City **Braddock** State **PA** Zip Code **15104**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB23-169309

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address **Eugene Peshette
PO Box 2214**

City **Citrus Heights** State **CA** Zip Code **95611**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB23-169310

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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Lee Thompson
408 East Ave.

City North Augusta State SC Zip Code 29841

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169311

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Trisha Groom
502 N Nelson St

City Bennington State KS Zip Code 67422

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169312

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Virginia Beck-Rhea
159 S 295th Pl

City Federal Way State WA Zip Code 98003

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169313

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 50.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Mary Anderson
4966 W Black Stallion Dr

City Prescott State AZ Zip Code 86305

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169314

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address D. Hillier
PO Box 246

City Poulsbo State WA Zip Code 98370

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169315

Amount of Each Disbursement this Period

| |
|--------|
| 120.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Donna Bruno
9837 Lakemere Dr

City Dallas State TX Zip Code 75238

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169316

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 160.00 |
|--------|

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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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address George Jacklin 5616 W Rita Dr. | | Transaction ID : SB23-169317 |
| City Milwaukee | State WI | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 13.33 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Martha Binford 108 Horner Street | | Transaction ID : SB23-169318 |
| City Belen | State NM | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Lin Herndon 80 Lyme RD Apt 318 | | Transaction ID : SB23-169319 |
| City Hanover | State NH | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 58.33 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Rosemary Wong
10 Crystal Springs Road Unit 1501

City San Mateo State CA Zip Code 94402

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : SB23-169320

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Roslyn Merfeld
1701 E 10th St

City Tucson State AZ Zip Code 85719

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : SB23-169321

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Milton Podolsky
180 East Pearson, Apt 3606

City Chicago State IL Zip Code 60611

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : SB23-169322

Amount of Each Disbursement this Period

| |
|--------|
| 400.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 525.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Elizabeth Owen
10 Park Drive

City Yalaha State FL Zip Code 34797

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-169323

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Patricia Barron
525 March Avenue

City Healdsburg State CA Zip Code 95448

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-169324

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Keith Housley
801 S Chester Rd Apt 514

City Swarthmore State PA Zip Code 19081

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2011

Transaction ID : SB23-169325

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

120.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Janet Spence
PO Box 465

City State Zip Code
Dennis MA 02638

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169326

Amount of Each Disbursement this Period

| |
|--------|
| 150.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address John MacLeod
46 Red Maple Way

City State Zip Code
Cincinnati OH 45246

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169327

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Judith Ancell
37524 Burton Court

City State Zip Code
Farmington MI 48331

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169328

Amount of Each Disbursement this Period

| |
|-------|
| 30.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
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| 230.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Theresa Phillips
152 Milmont Shores RD

City Chapin State SC Zip Code 29036

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169335**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Carolyn McFarland
4200 Duval Street

City Austin State TX Zip Code 78751

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169336**

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Abigail Agranat
284 Lafayette Street Apt. 6C

City New York State NY Zip Code 10012

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : **SB23-169337**

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

215.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Helen Smiler
324 Forest Street

City Oakland State CA Zip Code 94618

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169338

Amount of Each Disbursement this Period

| |
|-------|
| 33.33 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Sam Coltrin
PO Box 364

City Penryn State CA Zip Code 95663

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169339

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Karl Pribram
PO Box 679

City Warrenton State VA Zip Code 20188

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 01 | | 2011 |

Transaction ID : SB23-169340

Amount of Each Disbursement this Period

| |
|--------|
| 250.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 303.33 |
|--------|

| |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Christine Luce
100 Walton Street

City Portland State ME Zip Code 04103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169341

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Neva Hansen
179 Commercial Street Unit 4

City Provincetown State MA Zip Code 02657

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169342

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Sara Beauchamp
3620 N Carefree Cir.

City Colorado Springs State CO Zip Code 80917

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169343

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 70.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Benjamin Hochman
8116 W. Cliff Dr

City Knoxville State TN Zip Code 37909

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : SB23-169344

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Rose Moring
4124 Grantley Rd.

City Toledo State OH Zip Code 43613

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : SB23-169345

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Karolyn Poynter
7351 Willow Rd. Unit 7

City Frederick State MD Zip Code 21702

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 01 | / | 2011 |

Transaction ID : SB23-169346

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Sueo Yamashita
94-354 Kipou St

City Waipahu State HI Zip Code 96797

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169347

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Barbara Sacharow
7 E. 14th St.

City New York State NY Zip Code 10003

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169348

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Lana Edwards
3206 Palm Drive

City Delray Beach State FL Zip Code 33483

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169349

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|--------|
| 130.00 |
|--------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Richard Cornetti
1012 Baxter Dr

City Plano State TX Zip Code 75025

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169350

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Wanda Pruitt
3781 S. Creekside Dr

City New Palestine State IN Zip Code 46163

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169351

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Richard Rubenstein
39 Appaloosa Ln

City Bell Canyon State CA Zip Code 91307

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 01 | | | 2011 | | | |

Transaction ID : SB23-169352

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 55.00 |
|-------|

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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Chloe Davenport 216 NW 70th St. | | Transaction ID : SB23-169353 |
| City Seattle | State WA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 3.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Dolores Hillier PO Box 246 | | Transaction ID : SB23-169354 |
| City Poulsbo | State WA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 40.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Clare Smith-Larson 1200 5th Ave. SE | | Transaction ID : SB23-169355 |
| City Altoona | State IA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 53.00 |
| 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Shirley Swan 6821 Greencove Ave. | | Transaction ID : SB23-169356 |
| City Evansville | State IN | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Nancy Devos 6232 25th St. E | | Transaction ID : SB23-169357 |
| City Ellenton | State FL | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 40.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 01 / 2011 |
| Mailing Address Marybelle Suczek P.O. Box 2411 | | Transaction ID : SB23-169358 |
| City South Padre Island | State TX | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 33.35 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 98.35 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Democratic Congressional Campaign Committee

Mailing Address 430 S. Capitol Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Committee Contribution

Candidate Name

D

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169374

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Democratic Senatorial Campaign Committee

Mailing Address 120 Maryland Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Committee Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 01 / 2011

Transaction ID : SB23-169375

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Janet Hughes
2643 S Superior St

City Milwaukee State WI Zip Code 53207

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169456

Amount of Each Disbursement this Period

1.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

15001.00

**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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Thea Gast
40 East 15th Street

City Arcata State CA Zip Code 95521

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169457**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Kathleen Jaudzemis
1695 Cedar Lakes Rd.

City Cedar Bluffs State NE Zip Code 68015

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169458**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address James Leary
154 Lake Of The Pnes

City East Stroudsburg State PA Zip Code 18302

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169459**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

145.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address **Laura Griesedieck**
7712 Missy Court

City **Saint Louis** State **MO** Zip Code **63123**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-169463

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address **Christina Hirschhorn**
1 Claridge Drive

City **Verona** State **NJ** Zip Code **07044**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-169464

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address **Gay Leah Barfield**
PO 737

City **Mt. View** State **HI** Zip Code **96771**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-169465

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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Mary Dejong
1882 18th Avenue

City San Francisco State CA Zip Code 94122

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169466

Amount of Each Disbursement this Period

| |
|-------|
| 16.70 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Grace Huenemann
670 De Haro St. #3

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169467

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Dorothy Blumner
370 First Avenue #1D

City New York State NY Zip Code 10010

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169468

Amount of Each Disbursement this Period

| |
|-------|
| 40.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 66.70 |
|-------|

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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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Lynne Perman
185 NE Edgewater Dr Apt 5202

City Stuart State FL Zip Code 34996

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169469

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Gail Winnell
7024 El Torro St

City Zephyrhills State FL Zip Code 33541

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169470

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Toni Liebman
25 Glenwood Lane

City Roslyn Heights State NY Zip Code 11577

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169471

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 80.00 |
|-------|

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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Eleanor Vandenhuevel
3718 S. 334th Street

City Auburn State WA Zip Code 98001

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169472

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Marion Rendon
40 Schenck Ave., Apt. 2C

City Great Neck State NY Zip Code 11021

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169473

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Jean Klein
205 Gwynn Road Hngr 8

City Lebanon State TN Zip Code 37090

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169474

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

135.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Ruth Fredericks
3 Peter Cooper Rd Apt. 14E

City New York State NY Zip Code 10010

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169478

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Janet Jepsen
509 Mountainview Drive

City Wayne State PA Zip Code 19087

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169479

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Gerrie Barclay
32241 Southfield Road

City Birmingham State MI Zip Code 48025

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169480

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 160.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Kathryn Macchi
1003 E 44th Street

City Austin State TX Zip Code 78751

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169481

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Richard Gray
131 Riverside Dr., 1-A

City New York State NY Zip Code 10024

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169482

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Alice Kleinhans
45 North St.

City Andover State MA Zip Code 01810

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169483

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 210.00 |
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Andrew Carson
PO Box 709

City Wilson State WY Zip Code 83014

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-169484

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|-------|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | 10.00 |

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Pat Sibley
118 SW 116th Street Apt. D24

City Seattle State WA Zip Code 98146

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-169485

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|------|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | 2.00 |

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address William Kornfeld
1304 Bobbi Ct.

City Bowling Green State KY Zip Code 42103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-169486

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|-------|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | 33.33 |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | |
|---|---|---|---|---|
| 4 | 5 | . | 3 | 3 |
|---|---|---|---|---|

| | | | | |
|---|---|---|---|---|
| 4 | 5 | . | 3 | 3 |
|---|---|---|---|---|

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Phillip Berry
4510 Canyon Road

City Lafayette State CA Zip Code 94549

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169487**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Barbara Boggs
101 W. 147th Street # 21E

City New York State NY Zip Code 10039

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169488**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Joan Hubbell
509 Aurora Ave Unit 420

City Naperville State IL Zip Code 60540

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169489**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

290.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Barbara House
699 Lost River Road

City Mazama State WA Zip Code 98833

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169490

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Joslen Letscher
41120 Fox Run, Apt. T19

City Novi State MI Zip Code 48377

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169491

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Markate Daly
2730 Parker St.

City Berkeley State CA Zip Code 94704

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169492

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

95.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address N. Middleton
8 Windridge Rd.

City Essex Junction State VT Zip Code 05452

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169493

Amount of Each Disbursement this Period

83.35

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Ruth Mayerson
5021 Noeline Avenue

City Encino State CA Zip Code 91436

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169494

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Muriel Patterson
900 Hill Street

City Broomfield State CO Zip Code 80023

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169495

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

118.35

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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
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| <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. Tammy Baldwin for Senate

Mailing Address Carlyn Halde
63 Park Hill Ave.

City San Francisco State CA Zip Code 94117

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169496**

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Anna Vanfrachen
PO Box 68732

City Seattle State WA Zip Code 98168

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169497**

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Lois Schwartz
7275B St

City South Haven State MI Zip Code 49090

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169498**

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

65.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Judith Wilcox
26988 Heatherford Dr., Apt. 3

City Perrysburg State OH Zip Code 43551

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169499

Amount of Each Disbursement this Period

| |
|------|
| 6.66 |
|------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Dolores McCullough
21415 33rd Ave.

City Bayside State NY Zip Code 11361

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169500

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Sergei Kouznetsov
6757 Vermar Ter

City Eden Prairie State MN Zip Code 55346

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169501

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 41.66 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Elizabeth Aberdale
PO Box 1417

City Wellfleet State MA Zip Code 02667

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-169502

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 3 | 0 | . | 0 | 0 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Patricia Byard
3615 Maidu Pl.

City Davis State CA Zip Code 95618

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-169503

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 1 | 0 | . | 0 | 0 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Yvette Gunn
2328 Oakview Rd NE

City Atlanta State GA Zip Code 30317

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-169504

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 1 | 0 | . | 0 | 0 |
|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | |
|---|---|---|---|---|
| 1 | 4 | . | 0 | 0 |
|---|---|---|---|---|

| | | | | |
|---|---|---|---|---|
| 1 | 4 | . | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Ken Wilson
965 Kelly Blvd

City Springfield State OR Zip Code 97477

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169505

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Harriette Buchanan
194 Eastview Dr.

City Boone State NC Zip Code 28607

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169506

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Curtis Eaton
622 Hall Blvd

City Mason State MI Zip Code 48854

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169507

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address James Crawford
5760 Citrus Ave

City Whittier State CA Zip Code 90601

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169508**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Peter Lemkin
14825 Keeneland Circle

City North Potomac State MD Zip Code 20878

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169509**

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Mary Lyons
36 Barkley Cir.

City Fort Myers State FL Zip Code 33907

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169510**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

45.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address M. McAdam
710 Bird Bay Dr W

City Venice State FL Zip Code 34285

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169511**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Carol Detweiler
1704 Shadford Rd.

City Ann Arbor State MI Zip Code 48104

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169512**

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address John Bakhuls
6 Scottsdale Way # 1

City Novato State CA Zip Code 94947

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169513**

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

80.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Susan Oleshko
287 W 5th St.

City Deer Park State NY Zip Code 11729

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Transaction ID : **SB23-169514**

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 2 | 5 | . | 0 | 0 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Mary Bashore
31 Allen RD

City Ephrata State PA Zip Code 17522

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Transaction ID : **SB23-169515**

Amount of Each Disbursement this Period

| | | | |
|---|---|---|---|
| 5 | . | 0 | 0 |
|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Phyllis Gardner
406 Tennessee Glen Way

City Mill Valley State CA Zip Code 94941

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Transaction ID : **SB23-169516**

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 1 | 0 | . | 0 | 0 |
|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | |
|---|---|---|---|---|
| 4 | 0 | . | 0 | 0 |
|---|---|---|---|---|

| | | | | |
|---|---|---|---|---|
| 4 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address R Masty
975 Holly St.

City Bullhead City State AZ Zip Code 86442

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169517

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address James Gartner
78 Knapp ave apt b

City Clifton State NJ Zip Code 07011

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169518

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Shirley Bales
1525 Althea Dr

City Houston State TX Zip Code 77018

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169519

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

40.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address William Guthrie
301 Aden Ct.

City Upper Marlboro State MD Zip Code 20774

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169520

Amount of Each Disbursement this Period

4.16

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Eva Kelley
760 N 2nd St., Apt. 18

City Paragould State AR Zip Code 72450

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169521

Amount of Each Disbursement this Period

2.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Isabel Labriola
PO Box 10794

City Zephyr Cove State NV Zip Code 89448

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169522

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

26.16

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Michael Burt
505 13th St. SE, Apt. 1

City Washington State DC Zip Code 20003

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169523**

Amount of Each Disbursement this Period

100.00

B. Berkley for Senate

Mailing Address Paula Pippin
23257 Willow Creek Ln

City California State MD Zip Code 20619

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Berkley for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169524**

Amount of Each Disbursement this Period

30.00

C. Friends of Cheri Bustos

Mailing Address Kathleen Jaudzemis
1695 Cedar Lakes Rd.

City Cedar Bluffs State NE Zip Code 68015

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169525**

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

155.00

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address James Leary 154 Lake Of The Pnes | | Transaction ID : SB23-169526 |
| City East Stroudsburg | State PA | |
| Zip Code 18302 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Martha Robinson 4234 247th St. | | Transaction ID : SB23-169527 |
| City Little Neck | State NY | |
| Zip Code 11363 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Friends of Cheri Bustos | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Mary Schulz 2658 Holler Road | | Transaction ID : SB23-169528 |
| City Cortland | State NY | |
| Zip Code 13045 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 90.00 |
| 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 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)
EMILY's List

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Laurence Pimentel 3305 Riverwell Court | | Transaction ID : SB23-169529 |
| City Fort Worth | State TX | |
| Zip Code 76116 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 8.33 |
| Candidate Name Friends of Cheri Bustos | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Shirley Sutton 4339 NE Flanders Street | | Transaction ID : SB23-169530 |
| City Portland | State OR | |
| Zip Code 97213 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Friends of Cheri Bustos | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Christina Hirschhorn 1 Claridge Drive | | Transaction ID : SB23-169531 |
| City Verona | State NJ | |
| Zip Code 07044 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 5.00 |
| Candidate Name Friends of Cheri Bustos | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 63.33 |
| |

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Mary Dejong 1882 18th Avenue | | Transaction ID : SB23-169532 |
| City San Francisco | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 16.66 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Grace Huenemann 670 De Haro St. #3 | | Transaction ID : SB23-169533 |
| City San Francisco | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Dorothy Blumner 370 First Avenue #1D | | Transaction ID : SB23-169534 |
| City New York | State NY | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 40.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 66.66 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Lynne Perman
185 NE Edgewater Dr Apt 5202

City Stuart State FL Zip Code 34996

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169535

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Gail Winnell
7024 El Torro St

City Zephyrhills State FL Zip Code 33541

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169536

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Eleanor Vandenhuevel
3718 S. 334th Street

City Auburn State WA Zip Code 98001

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169537

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 130.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Marion Rendon
40 Schenck Ave., Apt. 2C

City Great Neck State NY Zip Code 11021

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169538

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Jean Klein
205 Gwynn Road Hngr 8

City Lebanon State TN Zip Code 37090

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169539

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Elizabeth Siegel
97 Barnes Rd

City Stamford State CT Zip Code 06902

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169540

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

45.00

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Ruth Fredericks 3 Peter Cooper Rd Apt. 14E | | Transaction ID : SB23-169541 |
| City New York | State NY | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Gerrie Barclay 32241 Southfield Road | | Transaction ID : SB23-169542 |
| City Birmingham | State MI | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Kathryn Macchi 1003 E 44th Street | | Transaction ID : SB23-169543 |
| City Austin | State TX | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 70.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address **Beverlee Mitchell**
3012 West Hollywood Avenue

City **Chicago** State **IL** Zip Code **60659**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-169544

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address **Richard Gray**
131 Riverside Dr., 1-A

City **New York** State **NY** Zip Code **10024**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-169545

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address **Alice Kleinhans**
45 North St.

City **Andover** State **MA** Zip Code **01810**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-169546

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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Phillip Berry 4510 Canyon Road | | Transaction ID : SB23-169550 |
| City Lafayette | State CA Zip Code 94549 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 250.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Barbara Boggs 101 W. 147th Street # 21E | | Transaction ID : SB23-169551 |
| City New York | State NY Zip Code 10039 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Joan Hubbell 509 Aurora Ave Unit 420 | | Transaction ID : SB23-169552 |
| City Naperville | State IL Zip Code 60540 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 290.00 |
| |

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Barbara House 699 Lost River Road | | Transaction ID : SB23-169553 |
| City Mazama | State WA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Joslen Letscher 41120 Fox Run, Apt. T19 | | Transaction ID : SB23-169554 |
| City Novi | State MI | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Kim Sampson PO Box 604 | | Transaction ID : SB23-169555 |
| City Collinsville | State IL | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 65.00 |
| 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Marybeth Webster 2916 E Loma Alta DR | | Transaction ID : SB23-169556 |
| City Douglas | State AZ | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address N. Middleton 8 Windridge Rd. | | Transaction ID : SB23-169557 |
| City Essex Junction | State VT | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 83.33 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Muriel Patterson 900 Hill Street | | Transaction ID : SB23-169558 |
| City Broomfield | State CO | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 143.33 |
| 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Carlyn Halde 63 Park Hill Ave. | | Transaction ID : SB23-169559 |
| City San Francisco | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Judith Wilcox 26988 Heatherford Dr., Apt. 3 | | Transaction ID : SB23-169560 |
| City Perrysburg | State OH | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 6.66 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Dolores McCullough 21415 33rd Ave. | | Transaction ID : SB23-169561 |
| City Bayside | State NY | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

66.66

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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Sergei Kouznetsov 6757 Vermar Ter | | Transaction ID : SB23-169562 |
| City Eden Prairie | State MN | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Patricia Byard 3615 Maidu Pl. | | Transaction ID : SB23-169563 |
| City Davis | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 100.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Ken Wilson 965 Kelly Blvd | | Transaction ID : SB23-169564 |
| City Springfield | State OR | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 120.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Harriette Buchanan
194 Eastview Dr.

City Boone State NC Zip Code 28607

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169565**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Curtis Eaton
622 Hall Blvd

City Mason State MI Zip Code 48854

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169566**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address James Crawford
5760 Citrus Ave

City Whittier State CA Zip Code 90601

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169567**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

60.00

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Peter Lemkin 14825 Keeneland Circle | | Transaction ID : SB23-169568 |
| City North Potomac | State MD | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 5.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Mary Lyons 36 Barkley Cir. | | Transaction ID : SB23-169569 |
| City Fort Myers | State FL | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address M. McAdam 710 Bird Bay Dr W | | Transaction ID : SB23-169570 |
| City Venice | State FL | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 45.00 |
| |

**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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Carol Detweiler 1704 Shadford Rd. | | Transaction ID : SB23-169571 |
| City Ann Arbor State MI Zip Code 48104 | Amount of Each Disbursement this Period 25.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address John Bakhuls 6 Scottsdale Way # 1 | | Transaction ID : SB23-169572 |
| City Novato State CA Zip Code 94947 | Amount of Each Disbursement this Period 10.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Susan Oleshko 287 W 5th St. | | Transaction ID : SB23-169573 |
| City Deer Park State NY Zip Code 11729 | Amount of Each Disbursement this Period 25.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 60.00 |
| 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Phyllis Gardner 406 Tennessee Glen Way | | Transaction ID : SB23-169574 |
| City Mill Valley | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address James Gartner 78 Knapp ave apt b | | Transaction ID : SB23-169575 |
| City Clifton | State NJ | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Shirley Bales 1525 Althea Dr | | Transaction ID : SB23-169576 |
| City Houston | State TX | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 40.00 |
| 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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address William Guthrie 301 Aden Ct. | | Transaction ID : SB23-169577 |
| City Upper Marlboro | State MD Zip Code 20774 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 4.16 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Eva Kelley 760 N 2nd St., Apt. 18 | | Transaction ID : SB23-169578 |
| City Paragould | State AR Zip Code 72450 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 2.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Eleanor Robison 2321 Black Oak Way | | Transaction ID : SB23-169579 |
| City Ashland | State OR Zip Code 97520 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 5.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 11.16 |
| |

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Isabel Labriola
PO Box 10794

City Zephyr Cove State NV Zip Code 89448

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169580

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Michael Burt
505 13th St. SE, Apt. 1

City Washington State DC Zip Code 20003

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169581

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Friends of Maria

Mailing Address Paula Pippin
23257 Willow Creek Ln

City California State MD Zip Code 20619

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Maria

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169582

Amount of Each Disbursement this Period

| |
|-------|
| 30.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|--------|
| 150.00 |
|--------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Lois Capps

Mailing Address Paula Orosz
1520 Estee Ave.

City Napa State CA Zip Code 94558

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Lois Capps

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169583

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

B. Friends of Lois Capps

Mailing Address Joanne Lyman
163 East 81 St Street

City NYC State NY Zip Code 10028

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Lois Capps

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169584

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Ardis Warcloud
P.O. Box 548

City Dupree State SD Zip Code 57623

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169586

Amount of Each Disbursement this Period

1.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

56.00

**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 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)
EMILY's List

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Laurence Pimentel 3305 Riverwell Court | | Transaction ID : SB23-169593 |
| City Fort Worth | State TX | |
| Zip Code 76116 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 8.33 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Shirley Sutton 4339 NE Flanders Street | | Transaction ID : SB23-169594 |
| City Portland | State OR | |
| Zip Code 97213 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 50.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Laura Griesedieck 7712 Missy Court | | Transaction ID : SB23-169595 |
| City Saint Louis | State MO | |
| Zip Code 63123 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 100.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 158.33 |
| 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 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)
EMILY's List

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Christina Hirschhorn 1 Claridge Drive | | Transaction ID : SB23-169596 |
| City Verona | State NJ | |
| Zip Code 07044 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 5.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Grace Huenemann 670 De Haro St. #3 | | Transaction ID : SB23-169597 |
| City San Francisco | State CA | |
| Zip Code 94107 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 10.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Lynne Perman 185 NE Edgewater Dr Apt 5202 | | Transaction ID : SB23-169598 |
| City Stuart | State FL | |
| Zip Code 34996 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 35.00 |
| 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Marion Rendon 40 Schenck Ave., Apt. 2C | | Transaction ID : SB23-169602 |
| City Great Neck | State NY | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 25.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Jean Klein 205 Gwynn Road Hngr 8 | | Transaction ID : SB23-169603 |
| City Lebanon | State TN | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Elizabeth Siegel 97 Barnes Rd | | Transaction ID : SB23-169604 |
| City Stamford | State CT | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 45.00 |
| |

**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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Mildred Schindler PO Box 826 | | Transaction ID : SB23-169605 |
| City Bokeelia | State FL Zip Code 33922 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 25.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Ruth Fredericks 3 Peter Cooper Rd Apt. 14E | | Transaction ID : SB23-169606 |
| City New York | State NY Zip Code 10010 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 10.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Gerrie Barclay 32241 Southfield Road | | Transaction ID : SB23-169607 |
| City Birmingham | State MI Zip Code 48025 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 50.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 85.00 |
| 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 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)
EMILY's List

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Harry Schwartz 50 Morningside DR | | Transaction ID : SB23-169608 |
| City New York | State NY | |
| Zip Code 10025 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 30.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Cynthia Brantley 3100 Shelter Cove Pl | | Transaction ID : SB23-169609 |
| City Davis | State CA | |
| Zip Code 95616 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 25.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Paula Pippin 23257 Willow Creek Ln | | Transaction ID : SB23-169610 |
| City California | State MD | |
| Zip Code 20619 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 30.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|---|-------|
| SUBTOTAL of Disbursements This Page (optional)..... ▶ | 85.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Alice Kleinhans
45 North St.

City Andover State MA Zip Code 01810

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169611

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Andrew Carson
PO Box 709

City Wilson State WY Zip Code 83014

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169612

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Pat Sibley
118 SW 116th Street Apt. D24

City Seattle State WA Zip Code 98146

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169613

Amount of Each Disbursement this Period

2.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

112.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Helen Gallew
123 E. 4th Street

City Lansdale State PA Zip Code 19446

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169620

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Joslen Letscher
41120 Fox Run, Apt. T19

City Novi State MI Zip Code 48377

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169621

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Kim Sampson
PO Box 604

City Collinsville State IL Zip Code 62234

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169622

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

70.00

**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 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)
EMILY's List

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Diane Steets 75 Pemberton Ave. | | Transaction ID : SB23-169623 |
| City Oceanport | State NJ | |
| Zip Code 07757 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 5.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Marybeth Webster 2916 E Loma Alta DR | | Transaction ID : SB23-169624 |
| City Douglas | State AZ | |
| Zip Code 85607 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 50.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address N. Middleton 8 Windridge Rd. | | Transaction ID : SB23-169625 |
| City Essex Junction | State VT | |
| Zip Code 05452 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 83.33 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... ▶ | 138.33 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Judith Wilcox
26988 Heatherford Dr., Apt. 3

City Perrysburg State OH Zip Code 43551

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | 1 | 1 |

Transaction ID : SB23-169629

Amount of Each Disbursement this Period

| | | | |
|---|---|---|---|
| 6 | . | 7 | 0 |
|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Sergei Kouznetsov
6757 Vermar Ter

City Eden Prairie State MN Zip Code 55346

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | 1 | 1 |

Transaction ID : SB23-169630

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 1 | 0 | . | 0 | 0 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Patricia Byard
3615 Maidu Pl.

City Davis State CA Zip Code 95618

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | 1 | 1 |

Transaction ID : SB23-169631

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 1 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| | | | | | |
|---|---|---|---|---|---|
| 1 | 1 | 6 | . | 7 | 0 |
|---|---|---|---|---|---|

TOTAL This Period (last page this line number only)..... ▶

| | | | | | |
|---|---|---|---|---|---|
| 1 | 1 | 6 | . | 7 | 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Ken Wilson 965 Kelly Blvd | | Transaction ID : SB23-169632 |
| City Springfield | State OR | |
| Zip Code 97477 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 10.00 |
| Candidate Name McCaskill for Missouri | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Vivian Hoffman 1600 Augusta Dr. Apt. 513 | | Transaction ID : SB23-169633 |
| City Houston | State TX | |
| Zip Code 77024 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 8.00 |
| Candidate Name McCaskill for Missouri | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Harriette Buchanan 194 Eastview Dr. | | Transaction ID : SB23-169634 |
| City Boone | State NC | |
| Zip Code 28607 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name McCaskill for Missouri | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 38.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Curtis Eaton
622 Hall Blvd

City Mason State MI Zip Code 48854

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169635**

Amount of Each Disbursement this Period

20.00

B. McCaskill for Missouri

Mailing Address James Crawford
5760 Citrus Ave

City Whittier State CA Zip Code 90601

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169636**

Amount of Each Disbursement this Period

20.00

C. McCaskill for Missouri

Mailing Address Peter Lemkin
14825 Keeneland Circle

City North Potomac State MD Zip Code 20878

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169637**

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

45.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Mary Lyons
36 Barkley Cir.

City Fort Myers State FL Zip Code 33907

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 0 | 8 | | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-169638

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 2 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address M. McAdam
710 Bird Bay Dr W

City Venice State FL Zip Code 34285

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 0 | 8 | | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-169639

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 2 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Carol Detweiler
1704 Shadford Rd.

City Ann Arbor State MI Zip Code 48104

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 0 | 8 | | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-169640

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)..... ▶

| | | | | | |
|---|---|---|---|---|---|
| 6 | 5 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

| | | | | | |
|---|---|---|---|---|---|
| 6 | 5 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Eva Kelley
760 N 2nd St., Apt. 18

City Paragould State AR Zip Code 72450

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169647**

Amount of Each Disbursement this Period

2.00

B. McCaskill for Missouri

Mailing Address Eleanor Robison
2321 Black Oak Way

City Ashland State OR Zip Code 97520

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169648**

Amount of Each Disbursement this Period

5.00

C. McCaskill for Missouri

Mailing Address Isabel Labriola
PO Box 10794

City Zephyr Cove State NV Zip Code 89448

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169649**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

27.00

**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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Michael Burt 505 13th St. SE, Apt. 1 | | Transaction ID : SB23-169650 Amount of Each Disbursement this Period 100.00 |
| City Washington State DC Zip Code 20003 | Category/ Type | |
| Purpose of Disbursement Candidate Contrib Earmarked | | |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Kathleen Jaudzemis 1695 Cedar Lakes Rd. | | Transaction ID : SB23-169651 Amount of Each Disbursement this Period 25.00 |
| City Cedar Bluffs State NE Zip Code 68015 | Category/ Type | |
| Purpose of Disbursement Candidate Contrib Earmarked | | |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Mary Dejong 1882 18th Avenue | | Transaction ID : SB23-169652 Amount of Each Disbursement this Period 16.66 |
| City San Francisco State CA Zip Code 94122 | Category/ Type | |
| Purpose of Disbursement Candidate Contrib Earmarked | | |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... ▶ | 141.66 |
| TOTAL This Period (last page this line number only)..... ▶ | 141.66 |

**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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Dolores McCullough 21415 33rd Ave. | | Transaction ID : SB23-169656 |
| City Bayside State NY Zip Code 11361 | Amount of Each Disbursement this Period 25.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Richard Gray 131 Riverside Dr., 1-A | | Transaction ID : SB23-169657 |
| City New York State NY Zip Code 10024 | Amount of Each Disbursement this Period 100.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. VAL DEMINGS FOR CONGRESS | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Kathleen Jaudzemis 1695 Cedar Lakes Rd. | | Transaction ID : SB23-169658 |
| City Cedar Bluffs State NE Zip Code 68015 | Amount of Each Disbursement this Period 25.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name VAL DEMINGS FOR CONGRESS | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 150.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address James Leary
154 Lake Of The Pnes

City East Stroudsburg State PA Zip Code 18302

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169659

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Mary Schulz
2658 Holler Road

City Cortland State NY Zip Code 13045

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169660

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Laurence Pimentel
3305 Riverwell Court

City Fort Worth State TX Zip Code 76116

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169661

Amount of Each Disbursement this Period

8.33

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

48.33

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Grace Huenemann
670 De Haro St. #3

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : **SB23-169665**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Pearl Zeitz
131 W 80th Street Apt. B

City New York State NY Zip Code 10024

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : **SB23-169666**

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Dorothy Blumner
370 First Avenue #1D

City New York State NY Zip Code 10010

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : **SB23-169667**

Amount of Each Disbursement this Period

| |
|-------|
| 40.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Gail Winnell
7024 El Torro St

City Zephyrhills State FL Zip Code 33541

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169671

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Eleanor Vandenheuevel
3718 S. 334th Street

City Auburn State WA Zip Code 98001

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169672

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Marion Rendon
40 Schenck Ave., Apt. 2C

City Great Neck State NY Zip Code 11021

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169673

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 135.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Jean Klein
205 Gwynn Road Hngr 8

City Lebanon State TN Zip Code 37090

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169674

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Rose Merritt
8 Oak Grove Dr Apt 104

City Novato State CA Zip Code 94949

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169675

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Elizabeth Siegel
97 Barnes Rd

City Stamford State CT Zip Code 06902

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169676

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 25.00 |
|-------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Ruby Munson
1153 Lowell Ave.

City Burlington State CO Zip Code 80807

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-169677

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Gerrie Barclay
32241 Southfield Road

City Birmingham State MI Zip Code 48025

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-169678

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Margaret Jean Cannon
548b Beach Road

City Sarasota State FL Zip Code 34242

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-169679

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 7 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 7 | 0 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Richard Gray
131 Riverside Dr., 1-A

City New York State NY Zip Code 10024

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : **SB23-169680**

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Alice Kleinhans
45 North St.

City Andover State MA Zip Code 01810

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : **SB23-169681**

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Andrew Carson
PO Box 709

City Wilson State WY Zip Code 83014

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : **SB23-169682**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|--------|
| 160.00 |
|--------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Pat Sibley
118 SW 116th Street Apt. D24

City State Zip Code
Seattle WA 98146

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169683

Amount of Each Disbursement this Period

2.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address William Kornfeld
1304 Bobbi Ct.

City State Zip Code
Bowling Green KY 42103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169684

Amount of Each Disbursement this Period

33.33

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Phillip Berry
4510 Canyon Road

City State Zip Code
Lafayette CA 94549

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169685

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

285.33

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Barbara Boggs
101 W. 147th Street # 21E

City New York State NY Zip Code 10039

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169686

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Marcia Roseman
6318 Warrens Way

City Wanaque State NJ Zip Code 07465

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169687

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Joan Hubbell
509 Aurora Ave Unit 420

City Naperville State IL Zip Code 60540

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169688

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 60.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address N. Middleton
8 Windridge Rd.

City Essex Junction State VT Zip Code 05452

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-169692

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 8 | 3 | . | 3 | 3 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Muriel Patterson
900 Hill Street

City Broomfield State CO Zip Code 80023

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-169693

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 1 | 0 | . | 0 | 0 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Carlyn Halde
63 Park Hill Ave.

City San Francisco State CA Zip Code 94117

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 1 | 2 | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-169694

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 5 | 0 | . | 0 | 0 |
|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | |
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| 1 | 4 | . | 3 | 3 |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Judith Wilcox
26988 Heatherford Dr., Apt. 3

City Perrysburg State OH Zip Code 43551

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : **SB23-169695**

Amount of Each Disbursement this Period

6.66

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Dolores McCullough
21415 33rd Ave.

City Bayside State NY Zip Code 11361

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : **SB23-169696**

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Sergei Kouznetsov
6757 Vermar Ter

City Eden Prairie State MN Zip Code 55346

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : **SB23-169697**

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

26.66

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Patricia Byard
3615 Maidu Pl.

City Davis State CA Zip Code 95618

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 08 | / | 2011 |

Transaction ID : SB23-169698

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Yvette Gunn
2328 Oakview Rd NE

City Atlanta State GA Zip Code 30317

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 08 | / | 2011 |

Transaction ID : SB23-169699

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Ken Wilson
965 Kelly Blvd

City Springfield State OR Zip Code 97477

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 08 | / | 2011 |

Transaction ID : SB23-169700

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 120.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Ellen Doyno
80 Meadowbrook Rd

City Buffalo State NY Zip Code 14221

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169701**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Harriette Buchanan
194 Eastview Dr.

City Boone State NC Zip Code 28607

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169702**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Curtis Eaton
622 Hall Blvd

City Mason State MI Zip Code 48854

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169703**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

65.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address James Crawford
5760 Citrus Ave

City Whittier State CA Zip Code 90601

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169704

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Peter Lemkin
14825 Keeneland Circle

City North Potomac State MD Zip Code 20878

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169705

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Mary Lyons
36 Barkley Cir.

City Fort Myers State FL Zip Code 33907

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169706

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

45.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address M. McAdam
710 Bird Bay Dr W

City Venice State FL Zip Code 34285

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : **SB23-169707**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Carol Detweiler
1704 Shadford Rd.

City Ann Arbor State MI Zip Code 48104

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : **SB23-169708**

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address John Bakhuls
6 Scottsdale Way # 1

City Novato State CA Zip Code 94947

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : **SB23-169709**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 55.00 |
|-------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Susan Oleshko
287 W 5th St.

City Deer Park State NY Zip Code 11729

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : **SB23-169710**

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Phyllis Gardner
406 Tennessee Glen Way

City Mill Valley State CA Zip Code 94941

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : **SB23-169711**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address James Gartner
78 Knapp ave apt b

City Clifton State NJ Zip Code 07011

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : **SB23-169712**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 45.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Ruth Fredericks
3 Peter Cooper Rd Apt. 14E

City New York State NY Zip Code 10010

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169713

Amount of Each Disbursement this Period

10.00

B. VAL DEMINGS FOR CONGRESS

Mailing Address William Guthrie
301 Aden Ct.

City Upper Marlboro State MD Zip Code 20774

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169714

Amount of Each Disbursement this Period

4.16

C. VAL DEMINGS FOR CONGRESS

Mailing Address Eva Kelley
760 N 2nd St., Apt. 18

City Paragould State AR Zip Code 72450

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169715

Amount of Each Disbursement this Period

2.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Eleanor Robison
2321 Black Oak Way

City Ashland State OR Zip Code 97520

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169716

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Isabel Labriola
PO Box 10794

City Zephyr Cove State NV Zip Code 89448

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169717

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Michael Burt
505 13th St. SE, Apt. 1

City Washington State DC Zip Code 20003

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169718

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
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| 125.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Lyda Harris
6814 S Dennis Dr.

City Tempe State AZ Zip Code 85283

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169719

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Beverlee Mitchell
3012 West Hollywood Avenue

City Chicago State IL Zip Code 60659

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169720

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address James Leary
154 Lake Of The Pnes

City East Stroudsburg State PA Zip Code 18302

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169721

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 145.00 |
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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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Christina Hirschhorn 1 Claridge Drive | | Transaction ID : SB23-169725 |
| City Verona | State NJ | |
| Zip Code 07044 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 5.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Mary Dejong 1882 18th Avenue | | Transaction ID : SB23-169726 |
| City San Francisco | State CA | |
| Zip Code 94122 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 16.66 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Grace Huenemann 670 De Haro St. #3 | | Transaction ID : SB23-169727 |
| City San Francisco | State CA | |
| Zip Code 94107 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 31.66 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Mailing Address Dorothy Blumner
370 First Avenue #1D

Transaction ID : SB23-169728

City New York State NY Zip Code 10010

Amount of Each Disbursement this Period

| |
|-------|
| 40.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Mailing Address Lynne Perman
185 NE Edgewater Dr Apt 5202

Transaction ID : SB23-169729

City Stuart State FL Zip Code 34996

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Mailing Address Gail Winnell
7024 El Torro St

Transaction ID : SB23-169730

City Zephyrhills State FL Zip Code 33541

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 70.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Mailing Address Marion Rendon
40 Schenck Ave., Apt. 2C

Transaction ID : **SB23-169731**

City Great Neck State NY Zip Code 11021

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Mailing Address Jean Klein
205 Gwynn Road Hngr 8

Transaction ID : **SB23-169732**

City Lebanon State TN Zip Code 37090

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Mailing Address Elizabeth Siegel
97 Barnes Rd

Transaction ID : **SB23-169733**

City Stamford State CT Zip Code 06902

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 45.00 |
|-------|

TOTAL This Period (last page this line number only)..... ▶

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| |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Ruby Munson
1153 Lowell Ave.

City Burlington State CO Zip Code 80807

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-169734

Amount of Each Disbursement this Period

B. Tammy Duckworth for Congress

Mailing Address Ruth Fredericks
3 Peter Cooper Rd Apt. 14E

City New York State NY Zip Code 10010

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-169735

Amount of Each Disbursement this Period

C. Tammy Duckworth for Congress

Mailing Address Janet Jepsen
509 Mountainview Drive

City Wayne State PA Zip Code 19087

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-169736

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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Gerrie Barclay 32241 Southfield Road | | Transaction ID : SB23-169737 |
| City Birmingham | State MI Zip Code 48025 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Harry Schwartz 50 Morningside DR | | Transaction ID : SB23-169738 |
| City New York | State NY Zip Code 10025 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 30.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Alice Kleinhans 45 North St. | | Transaction ID : SB23-169739 |
| City Andover | State MA Zip Code 01810 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 100.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 180.00 |
| 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 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)
EMILY's List

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Andrew Carson PO Box 709 | | Transaction ID : SB23-169740 |
| City Wilson | State WY | |
| Zip Code 83014 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Pat Sibley 118 SW 116th Street Apt. D24 | | Transaction ID : SB23-169741 |
| City Seattle | State WA | |
| Zip Code 98146 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 2.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address William Kornfeld 1304 Bobbi Ct. | | Transaction ID : SB23-169742 |
| City Bowling Green | State KY | |
| Zip Code 42103 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 33.33 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 45.33 |
| 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Janet Beal 6 Thistle Way | | Transaction ID : SB23-169743 |
| City Binghamton | State NY Zip Code 13901 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Phillip Berry 4510 Canyon Road | | Transaction ID : SB23-169744 |
| City Lafayette | State CA Zip Code 94549 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 250.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Barbara Boggs 101 W. 147th Street # 21E | | Transaction ID : SB23-169745 |
| City New York | State NY Zip Code 10039 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... ▶ | 295.00 |
| 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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Joan Hubbell 509 Aurora Ave Unit 420 | | Transaction ID : SB23-169746 |
| City Naperville State IL Zip Code 60540 | Amount of Each Disbursement this Period 20.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Barbara House 699 Lost River Road | | Transaction ID : SB23-169747 |
| City Mazama State WA Zip Code 98833 | Amount of Each Disbursement this Period 20.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Markate Daly 2730 Parker St. | | Transaction ID : SB23-169748 |
| City Berkeley State CA Zip Code 94704 | Amount of Each Disbursement this Period 50.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 90.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Harriet Steinberg
1731 Beacon Street, Apt. 210

City Brookline State MA Zip Code 02445

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169749

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Diane Steets
75 Pemberton Ave.

City Oceanport State NJ Zip Code 07757

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169750

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address N. Middleton
8 Windridge Rd.

City Essex Junction State VT Zip Code 05452

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169751

Amount of Each Disbursement this Period

83.33

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

113.33

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Muriel Patterson
900 Hill Street

City Broomfield State CO Zip Code 80023

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169752

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Carlyn Halde
63 Park Hill Ave.

City San Francisco State CA Zip Code 94117

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169753

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Judith Wilcox
26988 Heatherford Dr., Apt. 3

City Perrysburg State OH Zip Code 43551

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169754

Amount of Each Disbursement this Period

| |
|------|
| 6.66 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 66.66 |
|-------|

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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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Sergei Kouznetsov 6757 Vermar Ter | | Transaction ID : SB23-169755 |
| City Eden Prairie | State MN | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Patricia Byard 3615 Maidu Pl. | | Transaction ID : SB23-169756 |
| City Davis | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 100.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Yvette Gunn 2328 Oakview Rd NE | | Transaction ID : SB23-169757 |
| City Atlanta | State GA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 120.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Ken Wilson
965 Kelly Blvd

City Springfield State OR Zip Code 97477

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169758**

Amount of Each Disbursement this Period

10.00

B. Tammy Duckworth for Congress

Mailing Address Harriette Buchanan
194 Eastview Dr.

City Boone State NC Zip Code 28607

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169759**

Amount of Each Disbursement this Period

20.00

C. Tammy Duckworth for Congress

Mailing Address Curtis Eaton
622 Hall Blvd

City Mason State MI Zip Code 48854

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB23-169760**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

50.00

**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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address James Crawford
5760 Citrus Ave

City Whittier State CA Zip Code 90601

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169761

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Peter Lemkin
14825 Keeneland Circle

City North Potomac State MD Zip Code 20878

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169762

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Mary Lyons
36 Barkley Cir.

City Fort Myers State FL Zip Code 33907

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169763

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

45.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address M. McAdam
710 Bird Bay Dr W

City Venice State FL Zip Code 34285

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169764

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Carol Detweiler
1704 Shadford Rd.

City Ann Arbor State MI Zip Code 48104

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169765

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address John Bakhuls
6 Scottsdale Way # 1

City Novato State CA Zip Code 94947

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169766

Amount of Each Disbursement this Period

15.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

60.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Susan Oleshko
287 W 5th St.

City Deer Park State NY Zip Code 11729

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : **SB23-169767**

Amount of Each Disbursement this Period

25.00

B. Tammy Duckworth for Congress

Mailing Address Mary Bashore
31 Allen RD

City Ephrata State PA Zip Code 17522

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : **SB23-169768**

Amount of Each Disbursement this Period

5.00

C. Tammy Duckworth for Congress

Mailing Address Phyllis Gardner
406 Tennessee Glen Way

City Mill Valley State CA Zip Code 94941

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : **SB23-169769**

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

40.00

**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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address James Gartner
78 Knapp ave apt b

City Clifton State NJ Zip Code 07011

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169770

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address William Guthrie
301 Aden Ct.

City Upper Marlboro State MD Zip Code 20774

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169771

Amount of Each Disbursement this Period

4.16

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Eva Kelley
760 N 2nd St., Apt. 18

City Paragould State AR Zip Code 72450

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169772

Amount of Each Disbursement this Period

2.00

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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
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| <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. Tammy Duckworth for Congress

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Mailing Address Isabel Labriola
PO Box 10794

Transaction ID : SB23-169773

City Zephyr Cove State NV Zip Code 89448

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Purpose of Disbursement
Candidate Contrib Earmarked

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|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

Candidate Name
Tammy Duckworth for Congress

Category/
Type

Office Sought: House Senate President
 Disbursement For: 2012 Primary General Other (specify) ▼
 State: District:

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Date of Disbursement

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|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Mailing Address Michael Burt
505 13th St. SE, Apt. 1

Transaction ID : SB23-169774

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Purpose of Disbursement
Candidate Contrib Earmarked

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

Candidate Name
Tammy Duckworth for Congress

Category/
Type

Office Sought: House Senate President
 Disbursement For: 2012 Primary General Other (specify) ▼
 State: District:

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Mailing Address Beverlee Mitchell
3012 West Hollywood Avenue

Transaction ID : SB23-169775

City Chicago State IL Zip Code 60659

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
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Purpose of Disbursement
Candidate Contrib Earmarked

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

Candidate Name
Tammy Duckworth for Congress

Category/
Type

Office Sought: House Senate President
 Disbursement For: 2012 Primary General Other (specify) ▼
 State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 2 | 0 | 0 | 0 | 0 | 0 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Kathleen Jaudzemis
1695 Cedar Lakes Rd.

City Cedar Bluffs State NE Zip Code 68015

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169776

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Shirley Sutton
4339 NE Flanders Street

City Portland State OR Zip Code 97213

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169777

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Eleanor Vandeneuvel
3718 S. 334th Street

City Auburn State WA Zip Code 98001

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169778

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

175.00

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Richard Gray 131 Riverside Dr., 1-A | | Transaction ID : SB23-169779 |
| City New York | State NY | |
| Zip Code 10024 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Tammy Duckworth for Congress | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Joslen Letscher 41120 Fox Run, Apt. T19 | | Transaction ID : SB23-169780 |
| City Novi | State MI | |
| Zip Code 48377 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Tammy Duckworth for Congress | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Dolores McCullough 21415 33rd Ave. | | Transaction ID : SB23-169781 |
| City Bayside | State NY | |
| Zip Code 11361 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Tammy Duckworth for Congress | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 85.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Elizabeth Esty

Mailing Address **Cynthia Carr**
44 Brookwood Drive

City **Woodbridge** State **CT** Zip Code **06525**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Elizabeth Esty

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-169782

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Feinstein for Senate

Mailing Address **Bea Gold**
2206 Micheltorena

City **Los Angeles** State **CA** Zip Code **90039**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-169784

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Feinstein for Senate

Mailing Address **Joanne Lyman**
163 East 81 St Street

City **NYC** State **NY** Zip Code **10028**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB23-169785

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Feinstein for Senate

Mailing Address Jois Hofmann
1914 Subtropic Dr.

City La Habra Heights, State AZ Zip Code 90631

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169786

Amount of Each Disbursement this Period

25.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. Feinstein for Senate

Mailing Address Charles Walbridge
1886 Little Sandy Road

City Bruceton Mills State WV Zip Code 26525

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169787

Amount of Each Disbursement this Period

100.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. Feinstein for Senate

Mailing Address Pearl Spiro
62 New York Avenue

City Congers State NY Zip Code 10920

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169788

Amount of Each Disbursement this Period

50.00

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

175.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Feinstein for Senate

Mailing Address Jo Budman
31 Wilding Lane

City Oakland State CA Zip Code 94618

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169789

Amount of Each Disbursement this Period

18.00

Full Name (Last, First, Middle Initial)

B. Klobuchar for Minnesota

Mailing Address Jo Budman
31 Wilding Lane

City Oakland State CA Zip Code 94618

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Klobuchar for Minnesota

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169791

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

C. Klobuchar for Minnesota

Mailing Address Joanne Lyman
163 East 81 St Street

City NYC State NY Zip Code 10028

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Klobuchar for Minnesota

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB23-169792

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

123.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Klobuchar for Minnesota

Mailing Address **Lawrence Bianco**
Laurel Place-209 PO Box 125

City **Cornwall** State **PA** Zip Code **17016**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Klobuchar for Minnesota

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169793

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Klobuchar for Minnesota

Mailing Address **Paula Orosz**
1520 Estee Ave.

City **Napa** State **CA** Zip Code **94558**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Klobuchar for Minnesota

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169794

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Stabenow for US Senate

Mailing Address **Paula Pippin**
23257 Willow Creek Ln

City **California** State **MD** Zip Code **20619**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Stabenow for US Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169796

Amount of Each Disbursement this Period

| |
|-------|
| 30.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 140.00 |
|--------|

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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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Janet Hughes 2643 S Superior St | | Transaction ID : SB23-169797 Amount of Each Disbursement this Period 1.00 |
| City Milwaukee | State WI Zip Code 53207 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Bernice Keller 24359 Ross Court | | Transaction ID : SB23-169798 Amount of Each Disbursement this Period 10.00 |
| City Tehachapi | State CA Zip Code 93561 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Thea Gast 40 East 15th Street | | Transaction ID : SB23-169799 Amount of Each Disbursement this Period 100.00 |
| City Arcata | State CA Zip Code 95521 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... ▶ | 111.00 |
| 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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Kathleen Jaudzemis 1695 Cedar Lakes Rd. | | Transaction ID : SB23-169800 |
| City Cedar Bluffs | State NE Zip Code 68015 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address James Leary 154 Lake Of The Pnes | | Transaction ID : SB23-169801 |
| City East Stroudsburg | State PA Zip Code 18302 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Patricia Ellis 297 Old High St. | | Transaction ID : SB23-169802 |
| City Acton | State MA Zip Code 01720 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

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 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)
EMILY's List

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Laurence Pimentel 3305 Riverwell Court | | Transaction ID : SB23-169806 |
| City Fort Worth | State TX | |
| Zip Code 76116 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 8.33 |
| Candidate Name Elizabeth for MA Inc | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Shirley Sutton 4339 NE Flanders Street | | Transaction ID : SB23-169807 |
| City Portland | State OR | |
| Zip Code 97213 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Elizabeth for MA Inc | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Laura Griesedieck 7712 Missy Court | | Transaction ID : SB23-169808 |
| City Saint Louis | State MO | |
| Zip Code 63123 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 100.00 |
| Candidate Name Elizabeth for MA Inc | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 158.33 |
| |

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Christina Hirschhorn
1 Claridge Drive

City Verona State NJ Zip Code 07044

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169809

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Gay Leah Barfield
PO 737

City Mt. View State HI Zip Code 96771

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169810

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Mary Dejong
1882 18th Avenue

City San Francisco State CA Zip Code 94122

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169811

Amount of Each Disbursement this Period

| |
|-------|
| 16.66 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 31.66 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Grace Huenemann
670 De Haro St. #3

City San Francisco State CA Zip Code 94107

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169812

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Dorothy Blumner
370 First Avenue #1D

City New York State NY Zip Code 10010

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169813

Amount of Each Disbursement this Period

| |
|-------|
| 40.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Muriel Forlenza
1452 SE Andrews St.

City Stuart State FL Zip Code 34996

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169814

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 100.00 |
|--------|

| |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Lynne Perman
185 NE Edgewater Dr Apt 5202

City Stuart State FL Zip Code 34996

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169815

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Gayle Poinsette
4039 Fay Brook Rd.

City Sharon State VT Zip Code 05065

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169816

Amount of Each Disbursement this Period

| |
|-------|
| 30.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Kit Boniske
56 Starnes Ave Apt B

City Asheville State NC Zip Code 28801

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169817

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 100.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Gail Winnell
7024 El Torro St

City Zephyrhills State FL Zip Code 33541

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169818

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Eleanor Vandenneuvel
3718 S. 334th Street

City Auburn State WA Zip Code 98001

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169819

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Marion Rendon
40 Schenck Ave., Apt. 2C

City Great Neck State NY Zip Code 11021

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169820

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 135.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Milly Spector
3148 Gracefield Rd Apt T25

City Silver Spring State MD Zip Code 20904

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169824

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Ruth Fredericks
3 Peter Cooper Rd Apt. 14E

City New York State NY Zip Code 10010

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169825

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address John Isaacs
2018 Pierce Mill Road NW

City Washington State DC Zip Code 20010

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169826

Amount of Each Disbursement this Period

| |
|-------|
| 30.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 90.00 |
|-------|

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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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Gerrie Barclay 32241 Southfield Road | | Transaction ID : SB23-169827 |
| City Birmingham | State MI Zip Code 48025 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Margaret Jean Cannon 548b Beach Road | | Transaction ID : SB23-169828 |
| City Sarasota | State FL Zip Code 34242 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Kathryn Macchi 1003 E 44th Street | | Transaction ID : SB23-169829 |
| City Austin | State TX Zip Code 78751 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 70.00 |
| |

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Cynthia Brantley
3100 Shelter Cove Pl

City Davis State CA Zip Code 95616

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169830

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Richard Gray
131 Riverside Dr., 1-A

City New York State NY Zip Code 10024

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169831

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Alice Kleinhans
45 North St.

City Andover State MA Zip Code 01810

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169832

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|--------|
| 225.00 |
|--------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Andrew Carson
PO Box 709

City State Zip Code
Wilson WY 83014

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169833

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Pat Sibley
118 SW 116th Street Apt. D24

City State Zip Code
Seattle WA 98146

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169834

Amount of Each Disbursement this Period

| |
|------|
| 2.00 |
|------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address William Kornfeld
1304 Bobbi Ct.

City State Zip Code
Bowling Green KY 42103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169835

Amount of Each Disbursement this Period

| |
|-------|
| 33.35 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 45.35 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Phillip Berry
4510 Canyon Road

City Lafayette State CA Zip Code 94549

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169836

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Barbara Boggs
101 W. 147th Street # 21E

City New York State NY Zip Code 10039

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169837

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Marcia Roseman
6318 Warrens Way

City Wanaque State NJ Zip Code 07465

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169838

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
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| 540.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Joan Hubbell
509 Aurora Ave Unit 420

City Naperville State IL Zip Code 60540

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-169839

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Barbara House
699 Lost River Road

City Mazama State WA Zip Code 98833

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-169840

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Helen Gallew
123 E. 4th Street

City Lansdale State PA Zip Code 19446

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 0 | 8 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-169841

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 6 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 0 | 0 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Joslen Letscher
41120 Fox Run, Apt. T19

City State Zip Code
Novi MI 48377

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169842

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Harriet Steinberg
1731 Beacon Street, Apt. 210

City State Zip Code
Brookline MA 02445

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169843

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Marybeth Webster
2916 E Loma Alta DR

City State Zip Code
Douglas AZ 85607

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169844

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

100.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address N. Middleton
8 Windridge Rd.

City Essex Junction State VT Zip Code 05452

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 8 | | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-169845

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 8 | 3 | . | 3 | 3 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Ruth Mayerson
5021 Noeline Avenue

City Encino State CA Zip Code 91436

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 8 | | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-169846

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 2 | 5 | . | 0 | 0 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Muriel Patterson
900 Hill Street

City Broomfield State CO Zip Code 80023

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 0 | 8 | | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-169847

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 1 | 0 | . | 0 | 0 |
|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | |
|---|---|---|---|---|---|
| 1 | 1 | 8 | . | 3 | 3 |
|---|---|---|---|---|---|

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Carlyn Halde
63 Park Hill Ave.

City San Francisco State CA Zip Code 94117

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169848

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Lois Schwartz
7275B St

City South Haven State MI Zip Code 49090

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169849

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Judith Wilcox
26988 Heatherford Dr., Apt. 3

City Perrysburg State OH Zip Code 43551

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169850

Amount of Each Disbursement this Period

| |
|------|
| 6.66 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 66.66 |
|-------|

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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)
EMILY's List

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Dolores McCullough 21415 33rd Ave. | | Transaction ID : SB23-169851 Amount of Each Disbursement this Period 10.00 |
| City Bayside | State NY Zip Code 11361 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Sergei Kouznetsov 6757 Vermar Ter | | Transaction ID : SB23-169852 Amount of Each Disbursement this Period 10.00 |
| City Eden Prairie | State MN Zip Code 55346 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Patricia Byard 3615 Maidu Pl. | | Transaction ID : SB23-169853 Amount of Each Disbursement this Period 100.00 |
| City Davis | State CA Zip Code 95618 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 120.00 |
| |

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Ken Wilson
965 Kelly Blvd

City Springfield State OR Zip Code 97477

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169854

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Vivian Hoffman
1600 Augusta Dr. Apt. 513

City Houston State TX Zip Code 77024

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169855

Amount of Each Disbursement this Period

| |
|-------|
| 12.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Ellen Doyno
80 Meadowbrook Rd

City Buffalo State NY Zip Code 14221

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 08 | | | 2011 | | | |

Transaction ID : SB23-169856

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 47.00 |
|-------|

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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 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)
EMILY's List

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Harriette Buchanan 194 Eastview Dr. | | Transaction ID : SB23-169857 Amount of Each Disbursement this Period 20.00 |
| City Boone | State NC Zip Code 28607 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Curtis Eaton 622 Hall Blvd | | Transaction ID : SB23-169858 Amount of Each Disbursement this Period 20.00 |
| City Mason | State MI Zip Code 48854 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address James Crawford 5760 Citrus Ave | | Transaction ID : SB23-169859 Amount of Each Disbursement this Period 20.00 |
| City Whittier | State CA Zip Code 90601 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 60.00 |
| |

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Peter Lemkin
14825 Keeneland Circle

City North Potomac State MD Zip Code 20878

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169860

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Mary Lyons
36 Barkley Cir.

City Fort Myers State FL Zip Code 33907

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169861

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address M. McAdam
710 Bird Bay Dr W

City Venice State FL Zip Code 34285

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB23-169862

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

45.00

**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 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)
EMILY's List

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Carol Detweiler 1704 Shadford Rd. | | Transaction ID : SB23-169863 Amount of Each Disbursement this Period 50.00 |
| City Ann Arbor | State MI Zip Code 48104 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address John Bakhuls 6 Scottsdale Way # 1 | | Transaction ID : SB23-169864 Amount of Each Disbursement this Period 10.00 |
| City Novato | State CA Zip Code 94947 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Susan Oleshko 287 W 5th St. | | Transaction ID : SB23-169865 Amount of Each Disbursement this Period 25.00 |
| City Deer Park | State NY Zip Code 11729 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 85.00 |
| |

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address Phyllis Gardner 406 Tennessee Glen Way | | Transaction ID : SB23-169866 |
| City Mill Valley | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address James Gartner 78 Knapp ave apt b | | Transaction ID : SB23-169867 |
| City Clifton | State NJ | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address William Guthrie 301 Aden Ct. | | Transaction ID : SB23-169868 |
| City Upper Marlboro | State MD | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 4.20 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 24.20 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address **Betsi Bilyck**
230 Dolores St Apt 108

City **San Francisco** State **CA** Zip Code **94103**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169869

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address **Eva Kelley**
760 N 2nd St., Apt. 18

City **Paragould** State **AR** Zip Code **72450**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169870

Amount of Each Disbursement this Period

| |
|------|
| 2.00 |
|------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address **Eleanor Robison**
2321 Black Oak Way

City **Ashland** State **OR** Zip Code **97520**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169871

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 17.00 |
|-------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Isabel Labriola
PO Box 10794

City Zephyr Cove State NV Zip Code 89448

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169872

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Michael Burt
505 13th St. SE, Apt. 1

City Washington State DC Zip Code 20003

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169873

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Lyda Harris
6814 S Dennis Dr.

City Tempe State AZ Zip Code 85283

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 08 | | 2011 |

Transaction ID : SB23-169874

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|--------|
| 145.00 |
|--------|

TOTAL This Period (last page this line number only)..... ▶

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| |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Rowland Bell
606 Fords Landing Way

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170002**

Amount of Each Disbursement this Period

200.00

B. Tammy Baldwin for Senate

Mailing Address Joyce Newcomb
5355 Pooks Hill Rd.

City Bethesda State MD Zip Code 20814

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170003**

Amount of Each Disbursement this Period

20.00

C. Tammy Baldwin for Senate

Mailing Address Katherine Horowitz
2173 Glenkirk Drive

City San Jose State CA Zip Code 95124

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170004**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

240.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Robert Laveine
PO Box 412

City West Burlington State IA Zip Code 52655

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170008

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Joyce Goodman
1140 5th Avenue

City New York State NY Zip Code 10128

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170009

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Charlotte Pera
437 Jeter St

City Redwood City State CA Zip Code 94062

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170010

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

250.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Cynthia Pedlikin
118 Hussey RD

City State Zip Code
Peaks Island ME 04108

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170011

Amount of Each Disbursement this Period

12.50

B. Tammy Baldwin for Senate

Mailing Address Susan Nye
671 Roxborough Avenue

City State Zip Code
Philadelphia PA 19128

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170012

Amount of Each Disbursement this Period

8.35

C. Tammy Baldwin for Senate

Mailing Address Ruth Giese
12 Asbury Avenue

City State Zip Code
Binghamton NY 13901

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170013

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

45.85

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Frances Smith
30667 Mystic Forest Drive

City Farmington Hill State MI Zip Code 48331

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |

Transaction ID : SB23-170014

Amount of Each Disbursement this Period

| | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Mary Jefferson
5235 E. Fern Haven Lane

City Anaheim State CA Zip Code 92807

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |

Transaction ID : SB23-170015

Amount of Each Disbursement this Period

| | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Donald Sutherland
2221 Ocean Ave., Apt. 108

City Santa Monica State CA Zip Code 90405

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |

Transaction ID : SB23-170016

Amount of Each Disbursement this Period

| | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Carol Emerson
50 Vista Verde Way

City Edgewood State NM Zip Code 87015

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170017

Amount of Each Disbursement this Period

50.00

B. Tammy Baldwin for Senate

Mailing Address Elsie Murray
1429 Beulah Rd

City Pittsburgh State PA Zip Code 15235

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170018

Amount of Each Disbursement this Period

25.00

C. Tammy Baldwin for Senate

Mailing Address Eileen Coblens
91 Lancia Drive

City East Norwich State NY Zip Code 11732

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170019

Amount of Each Disbursement this Period

15.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

90.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Sandra Carr
2742 Bennett Ridge Rd.

City Santa Rosa State CA Zip Code 95404

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170020

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Donna Willoughby
22 Lake Creek RD

City Salmon State ID Zip Code 83467

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170021

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Catheine O'Connor
429 Josiah Bartlett Rd.

City Concord State NH Zip Code 03301

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170022

Amount of Each Disbursement this Period

| |
|------|
| 3.35 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 78.35 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Christina Baker
1150 Willow Glen Way

City San Jose State CA Zip Code 95125

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170023

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Grace Winchell
6411 Weber Circle

City Huntington Beach State CA Zip Code 92647

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170024

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Anne Campbell
1210 Spruce Street

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170025

Amount of Each Disbursement this Period

| |
|--------|
| 150.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 250.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Emily Pulitzer
4903 Pershing Place

City St Louis State MO Zip Code 63108

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170026

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Martha Stampfer
7290 Sayre Drive

City Oakland State CA Zip Code 94611

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170027

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Carole Allen
180 Montana Drive

City Danville State CA Zip Code 94526

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170028

Amount of Each Disbursement this Period

2.50

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

272.50

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address David Brickley
71 Throckmorton Ave

City West Long Branch State NJ Zip Code 07764

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : **SB23-170029**

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Carl Duzen
520 Kathmere Road

City Havertown State PA Zip Code 19083

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : **SB23-170030**

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Carolyn Thomas
7409 Flower Ave.

City Takoma Park State MD Zip Code 20912

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : **SB23-170031**

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 100.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address **B. Kinnear**
621B Idlewild Circle

City **Birmingham** State **AL** Zip Code **35205**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 1 | 5 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-170032

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address **Nancy Doolittle**
572 Spencer Road

City **Candor** State **NY** Zip Code **13743**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 1 | 5 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-170033

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address **Betty Tunstall**
PO Box 1091

City **Black Canyon City** State **AZ** Zip Code **85324**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 1 | 5 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-170034

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 3 | 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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Baldwin for Senate | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Susan Dennehy 240 Central Park S. | | Transaction ID : SB23-170035 |
| City New York | State NY | |
| Zip Code 10019 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 12.50 |
| Candidate Name Tammy Baldwin for Senate | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Baldwin for Senate | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Leslie Pierpont 4157 ortega blvd | | Transaction ID : SB23-170036 |
| City Jacksonville | State FL | |
| Zip Code 32210 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Tammy Baldwin for Senate | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Baldwin for Senate | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Gail Silverstone 6633 32 Place, NW 32nd Place, NW | | Transaction ID : SB23-170037 |
| City Washington, | State DC | |
| Zip Code 20015 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 33.33 |
| Candidate Name Tammy Baldwin for Senate | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 55.83 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Viviana Sanchez
1119 19 th street

City Bellingham State WA Zip Code 98225

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170038**

Amount of Each Disbursement this Period

5.00

B. Tammy Baldwin for Senate

Mailing Address Peter Henning
8485 Hunts Point Ln

City Hunts Point State WA Zip Code 98004

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170039**

Amount of Each Disbursement this Period

10.00

C. Tammy Baldwin for Senate

Mailing Address Neva Wall
150 Ashton Dr.

City Athens State GA Zip Code 30606

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170040**

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

40.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Dorothea Crisp
1245 SW Walking Wood

City Depoe Bay State OR Zip Code 97341

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170041

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Laura Steele
10509 Hutting Pl.

City Silver Spring State MD Zip Code 20902

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170042

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Nessa Peters
1010 cann road

City silver spring State MD Zip Code 20904

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170043

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 60.00 |
|-------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address John Brady
2609 Waverly Dr.

City Los Angeles State CA Zip Code 90039

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170044

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Joan Kowalski
54275 Bradshaw DR

City New Baltimore State MI Zip Code 48047

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170045

Amount of Each Disbursement this Period

| |
|------|
| 8.33 |
|------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Bernardo Hollman
10237 Autumnview Ln

City San Diego State CA Zip Code 92126

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170046

Amount of Each Disbursement this Period

| |
|------|
| 2.00 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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|--------|
| 110.33 |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Richard Bloss
2323 Simpson St.

City Evanston State IL Zip Code 60201

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
 Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170047

Amount of Each Disbursement this Period

| |
|------|
| 2.50 |
|------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Mary Sejda
6228 Forest Ave.

City Hammond State IN Zip Code 46324

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
 Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170048

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Berkley for Senate

Mailing Address Martha Stampfer
7290 Sayre Drive

City Oakland State CA Zip Code 94611

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Berkley for Senate

Office Sought: House Senate President
 Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170049

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 42.50 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Berkley for Senate

Mailing Address Carl Duzen
520 Kathmere Road

City Havertown State PA Zip Code 19083

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Berkley for Senate

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170050

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Rowland Bell
606 Fords Landing Way

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170051

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Joyce Newcomb
5355 Pooks Hill Rd.

City Bethesda State MD Zip Code 20814

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170052

Amount of Each Disbursement this Period

20.00

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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Katherine Horowitz 2173 Glenkirk Drive | | Transaction ID : SB23-170053 |
| City San Jose State CA Zip Code 95124 | Amount of Each Disbursement this Period 20.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Americo Garza 8815 Tweedy Lane | | Transaction ID : SB23-170054 |
| City Downey State CA Zip Code 90240 | Amount of Each Disbursement this Period 10.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Betty Armstrong 16221 SE 29th St | | Transaction ID : SB23-170055 |
| City Bellevue State WA Zip Code 98008 | Amount of Each Disbursement this Period 16.66 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

46.66

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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Robert Laveine PO Box 412 | | Transaction ID : SB23-170056 |
| City West Burlington | State IA Zip Code 52655 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 100.00 |
| Candidate Name Friends of Cheri Bustos | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Joyce Goodman 1140 5th Avenue | | Transaction ID : SB23-170057 |
| City New York | State NY Zip Code 10128 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 100.00 |
| Candidate Name Friends of Cheri Bustos | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Susan Nye 671 Roxborough Avenue | | Transaction ID : SB23-170058 |
| City Philadelphia | State PA Zip Code 19128 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 8.33 |
| Candidate Name Friends of Cheri Bustos | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 208.33 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Ruth Giese
12 Asbury Avenue

City Binghamton State NY Zip Code 13901

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170059**

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Frances Smith
30667 Mystic Forest Drive

City Farmington Hill State MI Zip Code 48331

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170060**

Amount of Each Disbursement this Period

16.66

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Mary Jefferson
5235 E. Fern Haven Lane

City Anaheim State CA Zip Code 92807

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170061**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

61.66

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Betty Jucevic
648 24th Place

City Hermosa Beach State CA Zip Code 90254

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170062

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Elsie Murray
1429 Beulah Rd

City Pittsburgh State PA Zip Code 15235

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170063

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Sandra Carr
2742 Bennett Ridge Rd.

City Santa Rosa State CA Zip Code 95404

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170064

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 70.00 |
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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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Donna Willoughby 22 Lake Creek RD | | Transaction ID : SB23-170065 |
| City Salmon | State ID | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Catheine O'Connor 429 Josiah Bartlett Rd. | | Transaction ID : SB23-170066 |
| City Concord | State NH | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 3.33 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Christina Baker 1150 Willow Glen Way | | Transaction ID : SB23-170067 |
| City San Jose | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

103.33

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Paul Lerman
413 W Englewood Ave

City Teaneck State NJ Zip Code 07666

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170068

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Richard Schmelzer
5114 Milward Drive

City Madison State WI Zip Code 53711

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170069

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Anne Campbell
1210 Spruce Street

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170070

Amount of Each Disbursement this Period

150.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

280.00

**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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Emily Pulitzer 4903 Pershing Place | | Transaction ID : SB23-170071 Amount of Each Disbursement this Period 250.00 |
| City St Louis | State MO | |
| Zip Code 63108 | Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type |
| Candidate Name Friends of Cheri Bustos | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Elizabeth Hale 9529 SW 196th Avenue Rd | | Transaction ID : SB23-170072 Amount of Each Disbursement this Period 50.00 |
| City Dunnellon | State FL | |
| Zip Code 34432 | Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type |
| Candidate Name Friends of Cheri Bustos | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Jane Ortel 66 Silver Lake Ave. | | Transaction ID : SB23-170073 Amount of Each Disbursement this Period 100.00 |
| City Wakefield | State RI | |
| Zip Code 02879 | Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type |
| Candidate Name Friends of Cheri Bustos | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |
| SUBTOTAL of Disbursements This Page (optional)..... ▶ | | 400.00 |
| 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Martha Stampfer 7290 Sayre Drive | | Transaction ID : SB23-170074 |
| City Oakland | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Carole Allen 180 Montana Drive | | Transaction ID : SB23-170075 |
| City Danville | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 2.50 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Janet Warner 229 Fayette New Wilmington | | Transaction ID : SB23-170076 |
| City New Wilmington | State PA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 100.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

122.50

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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Carl Duzen 520 Kathmere Road | | Transaction ID : SB23-170077 |
| City Havertown | State PA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Carolyn Thomas 7409 Flower Ave. | | Transaction ID : SB23-170078 |
| City Takoma Park | State MD | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address B. Kinnear 621B Idlewild Circle | | Transaction ID : SB23-170079 |
| City Birmingham | State AL | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 100.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 175.00 |
| 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 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)
EMILY's List

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Betty Tunstall PO Box 1091 | | Transaction ID : SB23-170080 |
| City Black Canyon City | State AZ Zip Code 85324 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Susan Dennehy 240 Central Park S. | | Transaction ID : SB23-170081 |
| City New York | State NY Zip Code 10019 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 12.50 |
| Candidate Name Friends of Cheri Bustos | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Leslie Pierpont 4157 ortega blvd | | Transaction ID : SB23-170082 |
| City Jacksonville | State FL Zip Code 32210 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | | |

| | |
|---|-------|
| SUBTOTAL of Disbursements This Page (optional)..... ▶ | 32.50 |
| 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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Gail Silverstone 6633 32 Place, NW 32nd Place, NW | | Transaction ID : SB23-170083 |
| City Washington, State DC Zip Code 20015 | Amount of Each Disbursement this Period 33.33 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Viviana Sanchez 1119 19 th street | | Transaction ID : SB23-170084 |
| City Bellingham State WA Zip Code 98225 | Amount of Each Disbursement this Period 5.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Peter Henning 8485 Hunts Point Ln | | Transaction ID : SB23-170085 |
| City Hunts Point State WA Zip Code 98004 | Amount of Each Disbursement this Period 10.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 48.33 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address **Neva Wall**
150 Ashton Dr.

City **Athens** State **GA** Zip Code **30606**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170086

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address **Dorothea Crisp**
1245 SW Walking Wood

City **Depoe Bay** State **OR** Zip Code **97341**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170087

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address **Laura Steele**
10509 Hutting Pl.

City **Silver Spring** State **MD** Zip Code **20902**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170088

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 65.00 |
|-------|

| |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address **Nessa Peters**
1010 cannn road

City **silver spring** State **MD** Zip Code **20904**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170089

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address **Marjorie Taylor**
140 Riverside Dr

City **New York** State **NY** Zip Code **10024**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170090

Amount of Each Disbursement this Period

| |
|-------|
| 60.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address **Joan Kowalski**
54275 Bradshaw DR

City **New Baltimore** State **MI** Zip Code **48047**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170091

Amount of Each Disbursement this Period

| |
|------|
| 8.33 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 88.33 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address **Bernardo Hollman**
10237 Autumnview Ln

City **San Diego** State **CA** Zip Code **92126**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 1 | 5 | | 2 | 0 | 1 | 1 |

Transaction ID : **SB23-170092**

Amount of Each Disbursement this Period

| | | | |
|---|---|---|---|
| 2 | . | 0 | 0 |
|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address **Richard Bloss**
2323 Simpson St.

City **Evanston** State **IL** Zip Code **60201**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 1 | 5 | | 2 | 0 | 1 | 1 |

Transaction ID : **SB23-170093**

Amount of Each Disbursement this Period

| | | | |
|---|---|---|---|
| 2 | . | 5 | 0 |
|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address **Mary Sejda**
6228 Forest Ave.

City **Hammond** State **IN** Zip Code **46324**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 1 | 5 | | 2 | 0 | 1 | 1 |

Transaction ID : **SB23-170094**

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 2 | 0 | . | 0 | 0 |
|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| | | | | |
|---|---|---|---|---|
| 2 | 4 | . | 5 | 0 |
|---|---|---|---|---|

TOTAL This Period (last page this line number only)..... ▶

| | | | | |
|---|---|---|---|---|
| 2 | 4 | . | 5 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SUSAN BYSIEWICZ FOR CONNECTICUT

Mailing Address Gregory Durniak
46-16 215th place 2D

City Bayside State NY Zip Code 11361

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
SUSAN BYSIEWICZ FOR CONNECTICUT

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170095

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. SUSAN BYSIEWICZ FOR CONNECTICUT

Mailing Address Amy Katz
1 Charcoal Hill Common

City Westport State CT Zip Code 06880

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
SUSAN BYSIEWICZ FOR CONNECTICUT

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170096

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. SUSAN BYSIEWICZ FOR CONNECTICUT

Mailing Address Shelley Rubin
502 Park Avenue PH25 PH 25

City New York State NY Zip Code 10022

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
SUSAN BYSIEWICZ FOR CONNECTICUT

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170097

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2550.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Rowland Bell
606 Fords Landing Way

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : **SB23-170099**

Amount of Each Disbursement this Period

| |
|--------|
| 200.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Joyce Newcomb
5355 Pooks Hill Rd.

City Bethesda State MD Zip Code 20814

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : **SB23-170100**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Katherine Horowitz
2173 Glenkirk Drive

City San Jose State CA Zip Code 95124

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : **SB23-170101**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|--------|
| 240.00 |
|--------|

TOTAL This Period (last page this line number only)..... ▶

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| |
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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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Betty Armstrong 16221 SE 29th St | | Transaction ID : SB23-170102 |
| City Bellevue State WA Zip Code 98008 | Amount of Each Disbursement this Period 16.66 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Laurie Mitchell 1414 Magers Landing Road | | Transaction ID : SB23-170103 |
| City Monkton State MD Zip Code 21111 | Amount of Each Disbursement this Period 25.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Robert Laveine PO Box 412 | | Transaction ID : SB23-170104 |
| City West Burlington State IA Zip Code 52655 | Amount of Each Disbursement this Period 100.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 141.66 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Joyce Goodman
1140 5th Avenue

City New York State NY Zip Code 10128

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170105

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Constance Counts
8 Hancock Ave

City Lexington State MA Zip Code 02420

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170106

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Jesse Perry
3748 Oakes Drive

City Hayward State CA Zip Code 94542

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170107

Amount of Each Disbursement this Period

15.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

215.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Maria Micola
1215 Cedar Grove Rd

City Media State PA Zip Code 19063

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170108

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Susan Nye
671 Roxborough Avenue

City Philadelphia State PA Zip Code 19128

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170109

Amount of Each Disbursement this Period

8.33

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Ruth Giese
12 Asbury Avenue

City Binghamton State NY Zip Code 13901

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170110

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

53.33

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Carol Emerson
50 Vista Verde Way

City Edgewood State NM Zip Code 87015

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | | | | | |
|----|---|---|---|----|---|---|---|------|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 12 | | | | 15 | | | | 2011 | | | | | |

Transaction ID : SB23-170114

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Susan Townsend
PO Box 717

City Dayton State OH Zip Code 45409

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | | | | | |
|----|---|---|---|----|---|---|---|------|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 12 | | | | 15 | | | | 2011 | | | | | |

Transaction ID : SB23-170115

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Elsie Murray
1429 Beulah Rd

City Pittsburgh State PA Zip Code 15235

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | | | | | |
|----|---|---|---|----|---|---|---|------|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 12 | | | | 15 | | | | 2011 | | | | | |

Transaction ID : SB23-170116

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 100.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Christina Baker
1150 Willow Glen Way

City San Jose State CA Zip Code 95125

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170120

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Paul Lerman
413 W Englewood Ave

City Teaneck State NJ Zip Code 07666

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170121

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Martha Pheneger
2310 Sky View Ln.

City Laramie State WY Zip Code 82070

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170122

Amount of Each Disbursement this Period

| |
|-------|
| 15.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|--------|
| 165.00 |
|--------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Anne Campbell
1210 Spruce Street

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170123

Amount of Each Disbursement this Period

| |
|--------|
| 150.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Martha Stampfer
7290 Sayre Drive

City Oakland State CA Zip Code 94611

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170124

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Carole Allen
180 Montana Drive

City Danville State CA Zip Code 94526

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170125

Amount of Each Disbursement this Period

| |
|------|
| 2.50 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|--------|
| 172.50 |
|--------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Janet Warner
229 Fayette New Wilmington

City New Wilmington State PA Zip Code 16142

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170126**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Carl Duzen
520 Kathmere Road

City Havertown State PA Zip Code 19083

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170127**

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Carolyn Thomas
7409 Flower Ave.

City Takoma Park State MD Zip Code 20912

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170128**

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

175.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address B. Kinnear
621B Idlewild Circle

City Birmingham State AL Zip Code 35205

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170129**

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Nancy Doolittle
572 Spencer Road

City Candor State NY Zip Code 13743

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170130**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Betty Tunstall
PO Box 1091

City Black Canyon City State AZ Zip Code 85324

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170131**

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

130.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Beatrice Weinstein
35 Willow Gate

City Roslyn Heights State NY Zip Code 11577

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|----|---|---|---|----|---|---|---|------|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 12 | | | | 15 | | | | 2011 | | | | | |

Transaction ID : SB23-170132

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Susan Dennehy
240 Central Park S.

City New York State NY Zip Code 10019

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|----|---|---|---|----|---|---|---|------|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 12 | | | | 15 | | | | 2011 | | | | | |

Transaction ID : SB23-170133

Amount of Each Disbursement this Period

| |
|-------|
| 12.50 |
|-------|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Leslie Pierpont
4157 ortega blvd

City Jacksonville State FL Zip Code 32210

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|----|---|---|---|----|---|---|---|------|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 12 | | | | 15 | | | | 2011 | | | | | |

Transaction ID : SB23-170134

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 72.50 |
|-------|

| |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Marianne Bayley
7501 Cumberland Rd., # 26

City Seminole State FL Zip Code 33777

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 1 | 5 | | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-170135

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 2 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Gail Silverstone
6633 32 Place, NW 32nd Place, NW

City Washington, DC State DC Zip Code 20015

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 1 | 5 | | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-170136

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 3 | 3 | 3 | . | 3 | 3 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Viviana Sanchez
1119 19 th street

City Bellingham State WA Zip Code 98225

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 1 | 5 | | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-170137

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 5 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | |
|---|---|---|---|---|---|
| 5 | 8 | 3 | . | 3 | 3 |
|---|---|---|---|---|---|

| | | | | | |
|---|---|---|---|---|---|
| 5 | 8 | 3 | . | 3 | 3 |
|---|---|---|---|---|---|

**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)
EMILY's List

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Peter Henning 8485 Hunts Point Ln | | Transaction ID : SB23-170138 |
| City Hunts Point | State WA | |
| Zip Code 98004 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 10.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Dorothea Crisp 1245 SW Walking Wood | | Transaction ID : SB23-170139 |
| City Depoe Bay | State OR | |
| Zip Code 97341 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Laura Steele 10509 Hutting Pl. | | Transaction ID : SB23-170140 |
| City Silver Spring | State MD | |
| Zip Code 20902 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 50.00 |
| |

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address **Nessa Peters**
1010 cann road

City **silver spring** State **MD** Zip Code **20904**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|----|---|---|---|----|---|---|---|------|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 12 | | | | 15 | | | | 2011 | | | | | |

Transaction ID : SB23-170141

Amount of Each Disbursement this Period

| | | | | | | |
|-------|---|---|---|---|---|---|
| 7 | 8 | 9 | 0 | . | 0 | 0 |
| 20.00 | | | | | | |

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address **John Quirk**
19103 Pala Mesa Place

City **Porter Ranch** State **CA** Zip Code **91326**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|----|---|---|---|----|---|---|---|------|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 12 | | | | 15 | | | | 2011 | | | | | |

Transaction ID : SB23-170142

Amount of Each Disbursement this Period

| | | | | | | |
|-------|---|---|---|---|---|---|
| 7 | 8 | 9 | 0 | . | 0 | 0 |
| 50.00 | | | | | | |

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address **Joan Kowalski**
54275 Bradshaw DR

City **New Baltimore** State **MI** Zip Code **48047**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|----|---|---|---|----|---|---|---|------|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | 3 | | 4 | 5 | 6 | | 7 | 8 | 9 | 0 | 1 | 2 |
| 12 | | | | 15 | | | | 2011 | | | | | |

Transaction ID : SB23-170143

Amount of Each Disbursement this Period

| | | | | | | |
|------|---|---|---|---|---|---|
| 7 | 8 | 9 | 0 | . | 0 | 0 |
| 8.33 | | | | | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | | |
|-------|---|---|---|---|---|---|
| 7 | 8 | 9 | 0 | . | 0 | 0 |
| 78.33 | | | | | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| 7 | 8 | 9 | 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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Bernardo Hollman 10237 Autumnview Ln | | Transaction ID : SB23-170144 |
| City San Diego | State CA Zip Code 92126 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 2.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Mary Sejda 6228 Forest Ave. | | Transaction ID : SB23-170145 |
| City Hammond | State IN Zip Code 46324 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 20.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Gylan Dickey 805 Glen Oak Dr | | Transaction ID : SB23-170146 |
| City Lebanon | State OR Zip Code 97355 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 10.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 32.00 |
| 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Sandra Carr 2742 Bennett Ridge Rd. | | Transaction ID : SB23-170147 |
| City Santa Rosa | State CA Zip Code 95404 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 25.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Donna Willoughby 22 Lake Creek RD | | Transaction ID : SB23-170148 |
| City Salmon | State ID Zip Code 83467 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Jane Ortel 66 Silver Lake Ave. | | Transaction ID : SB23-170149 |
| City Wakefield | State RI Zip Code 02879 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 100.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 175.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Rowland Bell
606 Fords Landing Way

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170150

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Joyce Newcomb
5355 Pooks Hill Rd.

City Bethesda State MD Zip Code 20814

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170151

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Katherine Horowitz
2173 Glenkirk Drive

City San Jose State CA Zip Code 95124

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170152

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

240.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address **Minette Hoffheimer**
1201 Edgecliff Pl., Apt. 1021 Apt.

City **Cincinnati** State **OH** Zip Code **45206**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170153

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address **Betty Armstrong**
16221 SE 29th St

City **Bellevue** State **WA** Zip Code **98008**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170154

Amount of Each Disbursement this Period

16.66

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address **Verna Robinson**
1737 Varnum Street NW

City **Washington** State **DC** Zip Code **20011**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170155

Amount of Each Disbursement this Period

12.50

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

129.16

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Robert Laveine
PO Box 412

City West Burlington State IA Zip Code 52655

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170156

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Joyce Goodman
1140 5th Avenue

City New York State NY Zip Code 10128

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170157

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Jesse Perry
3748 Oakes Drive

City Hayward State CA Zip Code 94542

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170158

Amount of Each Disbursement this Period

15.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

215.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Susan Nye
671 Roxborough Avenue

City Philadelphia State PA Zip Code 19128

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170159

Amount of Each Disbursement this Period

8.33

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Ruth Giese
12 Asbury Avenue

City Binghamton State NY Zip Code 13901

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170160

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Frances Smith
30667 Mystic Forest Drive

City Farmington Hill State MI Zip Code 48331

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170161

Amount of Each Disbursement this Period

16.66

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

49.99

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Mary Jefferson
5235 E. Fern Haven Lane

City Anaheim State CA Zip Code 92807

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : **SB23-170162**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Betty Jucevic
648 24th Place

City Hermosa Beach State CA Zip Code 90254

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : **SB23-170163**

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Elsie Murray
1429 Beulah Rd

City Pittsburgh State PA Zip Code 15235

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : **SB23-170164**

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 65.00 |
|-------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Nancy Wehrle
514 Chatham Rd

City Columbus State OH Zip Code 43214

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : **SB23-170165**

Amount of Each Disbursement this Period

| |
|-------|
| 15.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Donna Willoughby
22 Lake Creek RD

City Salmon State ID Zip Code 83467

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : **SB23-170166**

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Catheine O'Connor
429 Josiah Bartlett Rd.

City Concord State NH Zip Code 03301

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : **SB23-170167**

Amount of Each Disbursement this Period

| |
|------|
| 3.33 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 68.33 |
|-------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Christina Baker
1150 Willow Glen Way

City San Jose State CA Zip Code 95125

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170168

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Paul Lerman
413 W Englewood Ave

City Teaneck State NJ Zip Code 07666

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170169

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Anne Campbell
1210 Spruce Street

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170170

Amount of Each Disbursement this Period

150.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

300.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Emily Pulitzer
4903 Pershing Place

City St Louis State MO Zip Code 63108

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170171

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Elizabeth Hale
9529 SW 196th Avenue Rd

City Dunnellon State FL Zip Code 34432

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170172

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Jane Ortel
66 Silver Lake Ave.

City Wakefield State RI Zip Code 02879

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170173

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

400.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Martha Stampfer
7290 Sayre Drive

City Oakland State CA Zip Code 94611

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170174

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Carole Allen
180 Montana Drive

City Danville State CA Zip Code 94526

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170175

Amount of Each Disbursement this Period

2.50

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Carl Duzen
520 Kathmere Road

City Havertown State PA Zip Code 19083

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170176

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

72.50

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Carolyn Thomas
7409 Flower Ave.

City Takoma Park State MD Zip Code 20912

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 1 | 5 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-170177

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 2 | 5 | . | 0 | 0 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address B. Kinnear
621B Idlewild Circle

City Birmingham State AL Zip Code 35205

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 1 | 5 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-170178

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 1 | 0 | . | 0 | 0 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Betty Tunstall
PO Box 1091

City Black Canyon City State AZ Zip Code 85324

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 1 | 5 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-170179

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 1 | 0 | . | 0 | 0 |
|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | |
|---|---|---|---|---|
| 1 | 3 | . | 5 | 0 |
|---|---|---|---|---|

| | | | | |
|---|---|---|---|---|
| 1 | 3 | . | 5 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Susan Dennehy
240 Central Park S.

City New York State NY Zip Code 10019

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170180

Amount of Each Disbursement this Period

| |
|-------|
| 12.50 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Leslie Pierpont
4157 ortega blvd

City Jacksonville State FL Zip Code 32210

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170181

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Gail Silverstone
6633 32 Place, NW 32nd Place, NW

City Washington, State DC Zip Code 20015

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170182

Amount of Each Disbursement this Period

| |
|-------|
| 33.33 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 55.83 |
|-------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Viviana Sanchez
1119 19 th street

City Bellingham State WA Zip Code 98225

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Peter Henning
8485 Hunts Point Ln

City Hunts Point State WA Zip Code 98004

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Dorothea Crisp
1245 SW Walking Wood

City Depoe Bay State OR Zip Code 97341

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170183**

Amount of Each Disbursement this Period

5.00

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170184**

Amount of Each Disbursement this Period

10.00

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170185**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

35.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address **Laura Steele**
10509 Hutting Pl.

City **Silver Spring** State **MD** Zip Code **20902**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170186

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address **Nessa Peters**
1010 cann road

City **silver spring** State **MD** Zip Code **20904**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170187

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address **Marjorie Taylor**
140 Riverside Dr

City **New York** State **NY** Zip Code **10024**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170188

Amount of Each Disbursement this Period

| |
|-------|
| 60.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 100.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Joan Kowalski
54275 Bradshaw DR

City New Baltimore State MI Zip Code 48047

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 1 | 5 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-170189

Amount of Each Disbursement this Period

| | | | |
|---|---|---|---|
| 8 | . | 3 | 3 |
|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Bernardo Hollman
10237 Autumnview Ln

City San Diego State CA Zip Code 92126

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 1 | 5 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-170190

Amount of Each Disbursement this Period

| | | | |
|---|---|---|---|
| 2 | . | 0 | 0 |
|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Mary Sejda
6228 Forest Ave.

City Hammond State IN Zip Code 46324

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | | 1 | 5 | | 2 | 0 | 1 | 1 |

Transaction ID : SB23-170191

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 2 | 0 | . | 0 | 0 |
|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | |
|---|---|---|---|---|
| 3 | 0 | . | 3 | 3 |
|---|---|---|---|---|

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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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Rowland Bell 606 Fords Landing Way | | Transaction ID : SB23-170192 |
| City Alexandria | State VA Zip Code 22314 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 200.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Joyce Newcomb 5355 Pooks Hill Rd. | | Transaction ID : SB23-170193 |
| City Bethesda | State MD Zip Code 20814 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Katherine Horowitz 2173 Glenkirk Drive | | Transaction ID : SB23-170194 |
| City San Jose | State CA Zip Code 95124 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 240.00 |
| 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Betty Armstrong 16221 SE 29th St | | Transaction ID : SB23-170195 |
| City Bellevue | State WA Zip Code 98008 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 16.66 |
| Candidate Name Tammy Duckworth for Congress | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Robert Laveine PO Box 412 | | Transaction ID : SB23-170196 |
| City West Burlington | State IA Zip Code 52655 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 100.00 |
| Candidate Name Tammy Duckworth for Congress | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Joyce Goodman 1140 5th Avenue | | Transaction ID : SB23-170197 |
| City New York | State NY Zip Code 10128 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 100.00 |
| Candidate Name Tammy Duckworth for Congress | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

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|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 216.66 |
| 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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Maria Micola 1215 Cedar Grove Rd | | Transaction ID : SB23-170198 |
| City Media | State PA | |
| Zip Code 19063 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Susan Nye 671 Roxborough Avenue | | Transaction ID : SB23-170199 |
| City Philadelphia | State PA | |
| Zip Code 19128 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 8.33 |
| Candidate Name Tammy Duckworth for Congress | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Ruth Giese 12 Asbury Avenue | | Transaction ID : SB23-170200 |
| City Binghamton | State NY | |
| Zip Code 13901 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Tammy Duckworth for Congress | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 53.33 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Mailing Address Frances Smith
30667 Mystic Forest Drive

Transaction ID : SB23-170201

City Farmington Hill State MI Zip Code 48331

Amount of Each Disbursement this Period

| |
|-------|
| 16.66 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Mailing Address Mary Jefferson
5235 E. Fern Haven Lane

Transaction ID : SB23-170202

City Anaheim State CA Zip Code 92807

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Mailing Address Donald Sutherland
2221 Ocean Ave., Apt. 108

Transaction ID : SB23-170203

City Santa Monica State CA Zip Code 90405

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 56.66 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Elsie Murray
1429 Beulah Rd

City Pittsburgh State PA Zip Code 15235

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170204

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Donna Willoughby
22 Lake Creek RD

City Salmon State ID Zip Code 83467

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170205

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Catheine O'Connor
429 Josiah Bartlett Rd.

City Concord State NH Zip Code 03301

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170206

Amount of Each Disbursement this Period

3.33

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

78.33

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Christina Baker
1150 Willow Glen Way

City San Jose State CA Zip Code 95125

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170207

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Paul Lerman
413 W Englewood Ave

City Teaneck State NJ Zip Code 07666

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170208

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Joyanne Mills
40W665 Grand Monde Drive

City Elburn State IL Zip Code 60119

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170209

Amount of Each Disbursement this Period

| |
|--------|
| 125.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 275.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Anne Campbell
1210 Spruce Street

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170210**

Amount of Each Disbursement this Period

150.00

B. Tammy Duckworth for Congress

Mailing Address Emily Pulitzer
4903 Pershing Place

City St Louis State MO Zip Code 63108

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170211**

Amount of Each Disbursement this Period

250.00

C. Tammy Duckworth for Congress

Mailing Address Martha Stampfer
7290 Sayre Drive

City Oakland State CA Zip Code 94611

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170212**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

420.00

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Carole Allen 180 Montana Drive | | Transaction ID : SB23-170213 |
| City Danville | State CA Zip Code 94526 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 2.50 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Carl Duzen 520 Kathmere Road | | Transaction ID : SB23-170214 |
| City Havertown | State PA Zip Code 19083 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Carolyn Thomas 7409 Flower Ave. | | Transaction ID : SB23-170215 |
| City Takoma Park | State MD Zip Code 20912 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 77.50 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address **B. Kinnear**
621B Idlewild Circle

City **Birmingham** State **AL** Zip Code **35205**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170216

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address **Betty Tunstall**
PO Box 1091

City **Black Canyon City** State **AZ** Zip Code **85324**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170217

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address **Susan Dennehy**
240 Central Park S.

City **New York** State **NY** Zip Code **10019**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170218

Amount of Each Disbursement this Period

| |
|-------|
| 12.50 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 122.50 |
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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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Leslie Pierpont 4157 ortega blvd | | Transaction ID : SB23-170219 |
| City Jacksonville | State FL Zip Code 32210 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Marianne Bayley 7501 Cumberland Rd., # 26 | | Transaction ID : SB23-170220 |
| City Seminole | State FL Zip Code 33777 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Gail Silverstone 6633 32 Place, NW 32nd Place, NW | | Transaction ID : SB23-170221 |
| City Washington, | State DC Zip Code 20015 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 33.33 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 63.33 |
| 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Viviana Sanchez 1119 19 th street | | Transaction ID : SB23-170222 |
| City Bellingham | State WA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 5.00 |
| Candidate Name Tammy Duckworth for Congress | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Dorothea Crisp 1245 SW Walking Wood | | Transaction ID : SB23-170223 |
| City Depoe Bay | State OR | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Martha Pheneger 2310 Sky View Ln. | | Transaction ID : SB23-170224 |
| City Laramie | State WY | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 15.00 |
| Candidate Name Tammy Duckworth for Congress | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 40.00 |
| |

**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 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)
EMILY's List

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Nessa Peters 1010 cann road | | Transaction ID : SB23-170225 |
| City silver spring | State MD | |
| Zip Code 20904 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address John Quirk 19103 Pala Mesa Place | | Transaction ID : SB23-170226 |
| City Porter Ranch | State CA | |
| Zip Code 91326 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Joan Kowalski 54275 Bradshaw DR | | Transaction ID : SB23-170227 |
| City New Baltimore | State MI | |
| Zip Code 48047 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 8.33 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 78.33 |
| 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 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)
EMILY's List

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Bernardo Hollman 10237 Autumnview Ln | | Transaction ID : SB23-170228 |
| City San Diego | State CA Zip Code 92126 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 2.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Richard Bloss 2323 Simpson St. | | Transaction ID : SB23-170229 |
| City Evanston | State IL Zip Code 60201 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 2.50 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Mary Sejda 6228 Forest Ave. | | Transaction ID : SB23-170230 |
| City Hammond | State IN Zip Code 46324 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2012 | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 24.50 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Mailing Address Gylan Dickey
805 Glen Oak Dr

Transaction ID : **SB23-170231**

City Lebanon State OR Zip Code 97355

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Mailing Address Susan Townsend
PO Box 717

Transaction ID : **SB23-170232**

City Dayton State OH Zip Code 45409

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Mailing Address Martha Stampfer
7290 Sayre Drive

Transaction ID : **SB23-170233**

City Oakland State CA Zip Code 94611

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 55.00 |
|-------|

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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Peter Henning 8485 Hunts Point Ln | | Transaction ID : SB23-170234 |
| City Hunts Point | State WA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Laura Steele 10509 Hutting Pl. | | Transaction ID : SB23-170235 |
| City Silver Spring | State MD | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Feinstein for Senate | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Samantha Sandler 31 East 79th St | | Transaction ID : SB23-170236 |
| City New York | State NY | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 100.00 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 130.00 |
| |

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Feinstein for Senate | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Serena Connelly 3156 Brookhollow Drive | | Transaction ID : SB23-170237 |
| City Dallas | State TX | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 500.00 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Feinstein for Senate | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Jane Gilman 140 Sewall Ave | | Transaction ID : SB23-170238 |
| City brookline | State MA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | 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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Lois Frankel for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Martha Stampfer 7290 Sayre Drive | | Transaction ID : SB23-170240 |
| City Oakland | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Lois Frankel for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 530.00 |
| 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Lois Frankel for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Carl Duzen 520 Kathmere Road | | Transaction ID : SB23-170241 |
| City Havertown | State PA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Lois Frankel for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Mazie Hirono | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Martha Stampfer 7290 Sayre Drive | | Transaction ID : SB23-170242 |
| City Oakland | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Mazie Hirono | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Mazie Hirono | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Carl Duzen 520 Kathmere Road | | Transaction ID : SB23-170243 |
| City Havertown | State PA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Friends of Mazie Hirono | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 120.00 |
| 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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Kirkpatrick for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Martha Stampfer 7290 Sayre Drive | | Transaction ID : SB23-170244 |
| City Oakland | State CA Zip Code 94611 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 12,000.00 |
| Candidate Name Kirkpatrick for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Kirkpatrick for Congress | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Carl Duzen 520 Kathmere Road | | Transaction ID : SB23-170245 |
| City Havertown | State PA Zip Code 19083 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Kirkpatrick for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Klobuchar for Minnesota | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Gregory Durniak 46-16 215th place 2D | | Transaction ID : SB23-170246 |
| City Bayside | State NY Zip Code 11361 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Klobuchar for Minnesota | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 120.00 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Klobuchar for Minnesota

Mailing Address Deborah Rand
242 East 19 Street #11F

City New York State NY Zip Code 10003

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Klobuchar for Minnesota

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170247

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

B. Klobuchar for Minnesota

Mailing Address Serena Connelly
3156 Brookhollow Drive

City Dallas State TX Zip Code 75234

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Klobuchar for Minnesota

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170248

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Klobuchar for Minnesota

Mailing Address Jane Gilman
140 Sewall Ave

City brookline State MA Zip Code 02446

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Klobuchar for Minnesota

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB23-170249

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1060.00

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Anne McLane Kuster for Congress

Mailing Address Martha Stampfer
7290 Sayre Drive

City Oakland State CA Zip Code 94611

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Anne McLane Kuster for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170251**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

B. Anne McLane Kuster for Congress

Mailing Address Carl Duzen
520 Kathmere Road

City Havertown State PA Zip Code 19083

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Anne McLane Kuster for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170252**

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. Christie Vilsack for Iowa

Mailing Address Martha Stampfer
7290 Sayre Drive

City Oakland State CA Zip Code 94611

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Christie Vilsack for Iowa

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB23-170253**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

90.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Christie Vilsack for Iowa

Mailing Address Carl Duzen
520 Kathmere Road

City Havertown State PA Zip Code 19083

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Christie Vilsack for Iowa

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB23-170254

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Rowland Bell
606 Fords Landing Way

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB23-170255

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Joyce Newcomb
5355 Pooks Hill Rd.

City Bethesda State MD Zip Code 20814

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House Senate President
State: District: Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB23-170256

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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Katherine Horowitz 2173 Glenkirk Drive | | Transaction ID : SB23-170257 |
| City San Jose State CA Zip Code 95124 | Amount of Each Disbursement this Period 20.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Gylan Dickey 805 Glen Oak Dr | | Transaction ID : SB23-170258 |
| City Lebanon State OR Zip Code 97355 | Amount of Each Disbursement this Period 10.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Betty Armstrong 16221 SE 29th St | | Transaction ID : SB23-170259 |
| City Bellevue State WA Zip Code 98008 | Amount of Each Disbursement this Period 16.66 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 46.66 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Charlotte Pera
437 Jeter St

City Redwood City State CA Zip Code 94062

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170263

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Cynthia Pedlikin
118 Hussey RD

City Peaks Island State ME Zip Code 04108

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170264

Amount of Each Disbursement this Period

| |
|-------|
| 12.50 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Constance Counts
8 Hancock Ave

City Lexington State MA Zip Code 02420

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170265

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 162.50 |
|--------|

| |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Susan Nye
671 Roxborough Avenue

City Philadelphia State PA Zip Code 19128

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : **SB23-170266**

Amount of Each Disbursement this Period

| |
|------|
| 8.33 |
|------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Patrick Conley
7527 Lone Eagle Dr

City Murfreesboro State TN Zip Code 37128

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : **SB23-170267**

Amount of Each Disbursement this Period

| |
|-------|
| 30.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Ruth Giese
12 Asbury Avenue

City Binghamton State NY Zip Code 13901

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : **SB23-170268**

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 63.33 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address **Catheine O'Connor**
429 Josiah Bartlett Rd.

City **Concord** State **NH** Zip Code **03301**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170275

Amount of Each Disbursement this Period

3.33

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address **Christina Baker**
1150 Willow Glen Way

City **San Jose** State **CA** Zip Code **95125**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170276

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address **Richard Schmelzer**
5114 Milward Drive

City **Madison** State **WI** Zip Code **53711**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB23-170277

Amount of Each Disbursement this Period

30.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

83.33

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Joyanne Mills
40W665 Grand Monde Drive

City Elburn State IL Zip Code 60119

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170278

Amount of Each Disbursement this Period

| |
|--------|
| 125.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Grace Winchell
6411 Weber Circle

City Huntington Beach State CA Zip Code 92647

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170279

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Anne Campbell
1210 Spruce Street

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170280

Amount of Each Disbursement this Period

| |
|--------|
| 150.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 325.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Emily Pulitzer
4903 Pershing Place

City St Louis State MO Zip Code 63108

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170281

Amount of Each Disbursement this Period

| |
|--------|
| 250.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Elizabeth Hale
9529 SW 196th Avenue Rd

City Dunnellon State FL Zip Code 34432

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170282

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Jane Ortel
66 Silver Lake Ave.

City Wakefield State RI Zip Code 02879

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170283

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 400.00 |
|--------|

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| |
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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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Martha Stampfer 7290 Sayre Drive | | Transaction ID : SB23-170284 |
| City Oakland | State CA | |
| Zip Code 94611 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Elizabeth for MA Inc | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Carole Allen 180 Montana Drive | | Transaction ID : SB23-170285 |
| City Danville | State CA | |
| Zip Code 94526 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 2.50 |
| Candidate Name Elizabeth for MA Inc | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address David Brickley 71 Throckmorton Ave | | Transaction ID : SB23-170286 |
| City West Long Branch | State NJ | |
| Zip Code 07764 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Elizabeth for MA Inc | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 47.50 |
| |

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Carl Duzen
520 Kathmere Road

City Havertown State PA Zip Code 19083

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170287

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Carolyn Thomas
7409 Flower Ave.

City Takoma Park State MD Zip Code 20912

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170288

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address B. Kinnear
621B Idlewild Circle

City Birmingham State AL Zip Code 35205

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 15 | | | 2011 | | | |

Transaction ID : SB23-170289

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 175.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Nancy Doolittle
572 Spencer Road

City Candor State NY Zip Code 13743

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170290

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Betty Tunstall
PO Box 1091

City Black Canyon City State AZ Zip Code 85324

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170291

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Beatrice Weinstein
35 Willow Gate

City Roslyn Heights State NY Zip Code 11577

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170292

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 80.00 |
|-------|

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 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)
EMILY's List

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Susan Dennehy 240 Central Park S. | | Transaction ID : SB23-170293 |
| City New York | State NY | |
| Zip Code 10019 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 12.50 |
| Candidate Name Elizabeth for MA Inc | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Leslie Pierpont 4157 ortega blvd | | Transaction ID : SB23-170294 |
| City Jacksonville | State FL | |
| Zip Code 32210 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Elizabeth for MA Inc | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2011 |
| Mailing Address Marianne Bayley 7501 Cumberland Rd., # 26 | | Transaction ID : SB23-170295 |
| City Seminole | State FL | |
| Zip Code 33777 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Elizabeth for MA Inc | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 42.50 |
| |

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Gail Silverstone
6633 32 Place, NW 32nd Place, NW

City Washington, State DC Zip Code 20015

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB23-170296

Amount of Each Disbursement this Period

| |
|-------|
| 33.35 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Viviana Sanchez
1119 19 th street

City Bellingham State WA Zip Code 98225

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB23-170297

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Peter Henning
8485 Hunts Point Ln

City Hunts Point State WA Zip Code 98004

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 15 | / | 2011 |

Transaction ID : SB23-170298

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 48.35 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Dorothea Crisp
1245 SW Walking Wood

City Depoe Bay State OR Zip Code 97341

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170299

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Laura Steele
10509 Hutting Pl.

City Silver Spring State MD Zip Code 20902

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170300

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Nessa Peters
1010 cann road

City silver spring State MD Zip Code 20904

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170301

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 60.00 |
|-------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address John Brady
2609 Waverly Dr.

City Los Angeles State CA Zip Code 90039

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170302

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address John Quirk
19103 Pala Mesa Place

City Porter Ranch State CA Zip Code 91326

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170303

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Joan Kowalski
54275 Bradshaw DR

City New Baltimore State MI Zip Code 48047

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170304

Amount of Each Disbursement this Period

| |
|------|
| 8.35 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 208.35 |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address **Bernardo Hollman**
10237 Autumnview Ln

City **San Diego** State **CA** Zip Code **92126**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170305

Amount of Each Disbursement this Period

| |
|------|
| 2.00 |
|------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address **Richard Bloss**
2323 Simpson St.

City **Evanston** State **IL** Zip Code **60201**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170306

Amount of Each Disbursement this Period

| |
|------|
| 2.50 |
|------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address **Mary Sejda**
6228 Forest Ave.

City **Hammond** State **IN** Zip Code **46324**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 15 | | 2011 |

Transaction ID : SB23-170307

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 24.50 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SUSAN BYSIEWICZ FOR CONNECTICUT

Mailing Address 90 Court Street
Suite 200

City Middletown State CT Zip Code 06457

Purpose of Disbursement
Candidate Contribution

Candidate Name

SUSAN BYSIEWICZ FOR CONNECTICUT

Office Sought: House
 Senate
 President
State: CT District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | / | 21 | / | 2011 |

Transaction ID : SB23-170354

Amount of Each Disbursement this Period

| |
|---------|
| 5000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. Democratic Party of Wisconsin

Mailing Address 110 King St
Suite 203

City Madison State WI Zip Code 53703

Purpose of Disbursement
Committee Contribution

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 |
| 12 | / | 21 | / | 2011 |

Transaction ID : SB23-170360

Amount of Each Disbursement this Period

| |
|---------|
| 5000.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. Oregon Democratic Party

Mailing Address 232 NE 9th St

City Portland State OR Zip Code 97233

Purpose of Disbursement
Committee Contribution

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 |
| 12 | / | 21 | / | 2011 |

Transaction ID : SB23-170368

Amount of Each Disbursement this Period

| |
|---------|
| 5000.00 |
|---------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
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| 15000.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Dina Titus for Congress

Mailing Address P.O. Box 50614

City Henderson State NV Zip Code 89016

Purpose of Disbursement
Candidate Contribution

Candidate Name
Dina Titus for Congress

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: NV District: 03

Date of Disbursement

MM / DD / YYYY
12 / 21 / 2011

Transaction ID : **SB23-170374**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Betty Sutton for Congress

Mailing Address P.O. Box 14693

City Copley State OH Zip Code 44321

Purpose of Disbursement
Candidate Contribution

Candidate Name
Betty Sutton for Congress

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: OH District: 13

Date of Disbursement

MM / DD / YYYY
12 / 21 / 2011

Transaction ID : **SB23-170379**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Gloria Gray
436 Crestover Circle

City Richardson State TX Zip Code 75080

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : **SB23-170392**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

10020.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Susan Kirschenbaum
1783 South Rd.

City Kingston State RI Zip Code 02881

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : SB23-170393

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Nancy Richards
5207 Church Drive

City Charleston State WV Zip Code 25306

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : SB23-170394

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Peg French
544 Kemmerer Road

City State College State PA Zip Code 16801

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : SB23-170395

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

145.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Margaret Bam
16 Greens Way

City New Rochelle State NY Zip Code 10805

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170396

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

B. Tammy Baldwin for Senate

Mailing Address Carol Cooper
58 Grandview Ave.

City Kingston State NY Zip Code 12401

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170397

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

C. Tammy Baldwin for Senate

Mailing Address Rosemarie Sheperd
2 West 3rd Ave.

City Johnstown State NY Zip Code 12095

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170398

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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|--------|
| 110.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address **Barbara Carr**
3266 Chamberlain Cir.

City **Ann Arbor** State **MI** Zip Code **48103**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170399

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address **Marciarose Shestack**
2201 Pennsylvania Avenue

City **Philadelphia** State **PA** Zip Code **19130**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170400

Amount of Each Disbursement this Period

| |
|-------|
| 16.66 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address **Sydney Story**
205 E Terrace Ave

City **Fresno** State **CA** Zip Code **93704**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170401

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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|--------|
| 126.66 |
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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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Charlotte Alexandre
10345 Adams Pl

City Thornton State CO Zip Code 80229

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170402

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Mithlesh Prakash
2665 Condor Cir

City Corona State CA Zip Code 92882

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170403

Amount of Each Disbursement this Period

| |
|-------|
| 33.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Ellen Tirone
12 Edendale Ln

City Durham State NH Zip Code 03824

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170404

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

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|-------|
| 53.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Barry Weyburn
PO Box 388

City Rock Hall State MD Zip Code 21661

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170405

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Fred Martin
55 Holmes Ranch Rd PO Box 328

City Philo State CA Zip Code 95466

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170406

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Louise Weschler
161 Richdale Rd

City Colts Neck State NJ Zip Code 07722

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Tammy Baldwin for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170407

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

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|-------|
| 95.00 |
|-------|

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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Baldwin for Senate | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Edward Merrilees 150 McKnight Drive | | Transaction ID : SB23-170408 |
| City Laguna Beach | State CA Zip Code 92651 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 100.00 |
| Candidate Name Tammy Baldwin for Senate | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Baldwin for Senate | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Frederick Phillips 1939 Jefferson St., Apt. 101 | | Transaction ID : SB23-170409 |
| City Hollywood | State FL Zip Code 33020 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 2.50 |
| Candidate Name Tammy Baldwin for Senate | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Baldwin for Senate | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Judith Rogovin 4556 Forest Wood Trl | | Transaction ID : SB23-170410 |
| City Sarasota | State FL Zip Code 34241 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | Amount of Each Disbursement this Period 0.83 |
| Candidate Name Tammy Baldwin for Senate | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | 103.33 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Robert Schor
10 Ambassador Drive

City Rochester State NY Zip Code 14610

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170411

Amount of Each Disbursement this Period

| |
|--------|
| 166.66 |
|--------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Clair Sharpless
1 Drumlin Rd.

City West Simsbury State CT Zip Code 06092

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170412

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Bernard Shyffer
4212 Palos Verdes Drive E

City Rancho Pls. Vrd. State CA Zip Code 90275

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170413

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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| 366.66 |
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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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Elizabeth Williams
28 Olmstead Green Court

City Baltimore State MD Zip Code 21210

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170414

Amount of Each Disbursement this Period

| |
|-------|
| 30.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Nancy Anderson
245 N Vine St Apt 903

City Salt Lake City State UT Zip Code 84103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170415

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Judy Hunter
3586 Indigo Pond Dr

City Palm Harbor State FL Zip Code 34685

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170416

Amount of Each Disbursement this Period

| |
|------|
| 1.66 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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| 41.66 |
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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)

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Carl Weinberg
42 Green Oaks Ct.

City Walnut Creek State CA Zip Code 94596

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170417

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Baldwin for Senate

Mailing Address Eleanor Weiss
360 Osgood Road

City Milford State NH Zip Code 03055

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170418

Amount of Each Disbursement this Period

| |
|-------|
| 30.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Baldwin for Senate

Mailing Address Mary Kazmierski
5293 Snow Mass Trl.

City Harbor Springs State MI Zip Code 49740

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170419

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 70.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Baldwin for Senate

Mailing Address Marian Ryan
2460 Linette Ct

City Yorktown Heights State NY Zip Code 10598

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170420

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

B. Tammy Baldwin for Senate

Mailing Address Mary Kazmierski
5293 Snow Mass Trl.

City Harbor Springs State MI Zip Code 49740

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Baldwin for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170421

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

C. Berkley for Senate

Mailing Address Cynthia Arnold
PO Box 14473

City San Francisco State CA Zip Code 94114

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Berkley for Senate

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170422

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 65.00 |
|-------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Berkley for Senate

Mailing Address Elizabeth Niccolls
800 S 15th St Unit 1631

City Sebring State OH Zip Code 44672

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Berkley for Senate

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170423

Amount of Each Disbursement this Period

| |
|-------|
| 14.28 |
|-------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Gloria Gray
436 Crestover Circle

City Richardson State TX Zip Code 75080

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170424

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Nancy Richards
5207 Church Drive

City Charleston State WV Zip Code 25306

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Friends of Cheri Bustos

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170425

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 54.28 |
|-------|

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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Peg French 544 Kemmerer Road | | Transaction ID : SB23-170426 |
| City State Zip Code State College PA 16801 | Amount of Each Disbursement this Period 25.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Carol Cooper 58 Grandview Ave. | | Transaction ID : SB23-170427 |
| City State Zip Code Kingston NY 12401 | Amount of Each Disbursement this Period 10.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Rosemarie Sheperd 2 West 3rd Ave. | | Transaction ID : SB23-170428 |
| City State Zip Code Johnstown NY 12095 | Amount of Each Disbursement this Period 50.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

85.00

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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Marciarose Shestack 2201 Pennsylvania Avenue | | Transaction ID : SB23-170429 |
| City Philadelphia | State PA Zip Code 19130 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 16.67 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Rita Lepscier 18511 Pine Lake Dr Apt 1 | | Transaction ID : SB23-170430 |
| City Tinley Park | State IL Zip Code 60477 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Sydney Story 205 E Terrace Ave | | Transaction ID : SB23-170431 |
| City Fresno | State CA Zip Code 93704 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Friends of Cheri Bustos | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 36.67 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Charlotte Alexandre
10345 Adams Pl

City Thornton State CO Zip Code 80229

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170432

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Mithlesh Prakash
2665 Condor Cir

City Corona State CA Zip Code 92882

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170433

Amount of Each Disbursement this Period

| |
|------|
| 8.50 |
|------|

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Ellen Tirone
12 Edendale Ln

City Durham State NH Zip Code 03824

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170434

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 28.50 |
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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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Barry Weyburn PO Box 388 | | Transaction ID : SB23-170435 |
| City Rock Hall | State MD | |
| Zip Code 21661 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Friends of Cheri Bustos | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Fred Martin 55 Holmes Ranch Rd PO Box 328 | | Transaction ID : SB23-170436 |
| City Philo | State CA | |
| Zip Code 95466 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Friends of Cheri Bustos | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Cheri Bustos | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Louise Weschler 161 Richdale Rd | | Transaction ID : SB23-170437 |
| City Colts Neck | State NJ | |
| Zip Code 07722 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Friends of Cheri Bustos | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------|
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Judith Rogovin
4556 Forest Wood Trl

City Sarasota State FL Zip Code 34241

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : **SB23-170438**

Amount of Each Disbursement this Period

0.84

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Robert Schor
10 Ambassador Drive

City Rochester State NY Zip Code 14610

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : **SB23-170439**

Amount of Each Disbursement this Period

166.67

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Clair Sharpless
1 Drumlin Rd.

City West Simsbury State CT Zip Code 06092

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : **SB23-170440**

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

267.51

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Harriet S. Growick
3850 Washington Street #916 #916

City Hollywood State FL Zip Code 33021

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : SB23-170441

Amount of Each Disbursement this Period

18.00

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Bernard Shyffer
4212 Palos Verdes Drive E

City Rancho Pls. Vrd. State CA Zip Code 90275

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : SB23-170442

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Nancy Anderson
245 N Vine St Apt 903

City Salt Lake City State UT Zip Code 84103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : SB23-170443

Amount of Each Disbursement this Period

10.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

128.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Cheri Bustos

Mailing Address Judy Hunter
3586 Indigo Pond Dr

City State Zip Code
Palm Harbor FL 34685

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : **SB23-170444**

Amount of Each Disbursement this Period

1.67

Full Name (Last, First, Middle Initial)

B. Friends of Cheri Bustos

Mailing Address Carl Weinberg
42 Green Oaks Ct.

City State Zip Code
Walnut Creek CA 94596

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : **SB23-170445**

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Friends of Cheri Bustos

Mailing Address Marian Ryan
2460 Linette Ct

City State Zip Code
Yorktown Heights NY 10598

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Cheri Bustos

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : **SB23-170446**

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

41.67

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. SUSAN BYSIEWICZ FOR CONNECTICUT

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Mailing Address Sheila Toabe Davis
7913 Vantage Aave.

Transaction ID : SB23-170448

City North Hollywood State CA Zip Code 91605

Amount of Each Disbursement this Period

| |
|-------|
| 99.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

SUSAN BYSIEWICZ FOR CONNECTICUT

Office Sought: House Senate President
Disbursement For: 2012 Primary General
 Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Mailing Address Nancy Richards
5207 Church Drive

Transaction ID : SB23-170449

City Charleston State WV Zip Code 25306

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012 Primary General
 Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Mailing Address Peg French
544 Kemmerer Road

Transaction ID : SB23-170450

City State College State PA Zip Code 16801

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012 Primary General
 Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 99.00 |
|-------|

TOTAL This Period (last page this line number only)..... ▶

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| |
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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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Rosemarie Sheperd 2 West 3rd Ave. | | Transaction ID : SB23-170451 |
| City Johnstown | State NY Zip Code 12095 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 50.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Marciarose Shestack 2201 Pennsylvania Avenue | | Transaction ID : SB23-170452 |
| City Philadelphia | State PA Zip Code 19130 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 16.67 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Cynthia Arnold PO Box 14473 | | Transaction ID : SB23-170453 |
| City San Francisco | State CA Zip Code 94114 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Tammy Duckworth for Congress | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 91.67 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Rita Lepscier
18511 Pine Lake Dr Apt 1

City Tinley Park State IL Zip Code 60477

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170454

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Sydney Story
205 E Terrace Ave

City Fresno State CA Zip Code 93704

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170455

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Chrystyne Braaten
1222 SW Leschi DR

City Oak Harbor State WA Zip Code 98277

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170456

Amount of Each Disbursement this Period

| |
|------|
| 2.00 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 22.00 |
|-------|

TOTAL This Period (last page this line number only)..... ▶

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| |
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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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Charlotte Alexandre 10345 Adams Pl | | Transaction ID : SB23-170457 |
| City Thornton | State CO Zip Code 80229 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Lillian Davis 108 Boulder Rd | | Transaction ID : SB23-170458 |
| City Plymouth Meeting | State PA Zip Code 19462 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 5.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Mithlesh Prakash 2665 Condor Cir | | Transaction ID : SB23-170459 |
| City Corona | State CA Zip Code 92882 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 8.50 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 23.50 |
| |

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Mailing Address Ellen Tirone
12 Edendale Ln

Transaction ID : SB23-170460

City Durham State NH Zip Code 03824

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Mailing Address Elizabeth Niccolls
800 S 15th St Unit 1631

Transaction ID : SB23-170461

City Sebring State OH Zip Code 44672

Amount of Each Disbursement this Period

| |
|-------|
| 14.29 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Mailing Address Fred Martin
55 Holmes Ranch Rd PO Box 328

Transaction ID : SB23-170462

City Philo State CA Zip Code 95466

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Purpose of Disbursement
Candidate Contrib Earmarked

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Tammy Duckworth for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 44.29 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Louise Weschler
161 Richdale Rd

City State Zip Code
Colts Neck NJ 07722

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : SB23-170463

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Judith Rogovin
4556 Forest Wood Trl

City State Zip Code
Sarasota FL 34241

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : SB23-170464

Amount of Each Disbursement this Period

0.84

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Robert Schor
10 Ambassador Drive

City State Zip Code
Rochester NY 14610

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : SB23-170465

Amount of Each Disbursement this Period

166.67

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

192.51

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Clair Sharpless
1 Drumlin Rd.

City West Simsbury State CT Zip Code 06092

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : **SB23-170466**

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

B. Tammy Duckworth for Congress

Mailing Address Harriet S. Growick
3850 Washington Street #916 #916

City Hollywood State FL Zip Code 33021

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : **SB23-170467**

Amount of Each Disbursement this Period

| |
|-------|
| 18.00 |
|-------|

C. Tammy Duckworth for Congress

Mailing Address Bernard Shyffer
4212 Palos Verdes Drive E

City Rancho Pls. Vrd. State CA Zip Code 90275

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : **SB23-170468**

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 218.00 |
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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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Eleanor Weiss 360 Osgood Road | | Transaction ID : SB23-170469 |
| City Milford | State NH Zip Code 03055 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 30.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Marian Ryan 2460 Linette Ct | | Transaction ID : SB23-170470 |
| City Yorktown Heights | State NY Zip Code 10598 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Tammy Duckworth for Congress | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Gloria Gray 436 Crestover Circle | | Transaction ID : SB23-170471 |
| City Richardson | State TX Zip Code 75080 | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Tammy Duckworth for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 70.00 |
| |

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Carol Cooper
58 Grandview Ave.

City Kingston State NY Zip Code 12401

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170472

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Tammy Duckworth for Congress

Mailing Address Nancy Anderson
245 N Vine St Apt 903

City Salt Lake City State UT Zip Code 84103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170473

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Tammy Duckworth for Congress

Mailing Address Judy Hunter
3586 Indigo Pond Dr

City Palm Harbor State FL Zip Code 34685

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170474

Amount of Each Disbursement this Period

| |
|------|
| 1.67 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 21.67 |
|-------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Tammy Duckworth for Congress

Mailing Address Carl Weinberg
42 Green Oaks Ct.

City Walnut Creek State CA Zip Code 94596

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Tammy Duckworth for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170475

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Feinstein for Senate

Mailing Address Bonnie Kolker
4 Sycamore Way

City Mt. Arlington State NJ Zip Code 07856

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170477

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Feinstein for Senate

Mailing Address Gino Crocetti
652 w 163 st

City New York State NY Zip Code 10032

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170478

Amount of Each Disbursement this Period

| |
|-------|
| 15.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 60.00 |
|-------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Feinstein for Senate

Mailing Address **Sheila Toabe Davis**
7913 Vantage Aave.

City **North Hollywood** State **CA** Zip Code **91605**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170479

Amount of Each Disbursement this Period

| |
|-------|
| 54.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Lois Frankel for Congress

Mailing Address **Cynthia Arnold**
PO Box 14473

City **San Francisco** State **CA** Zip Code **94114**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Lois Frankel for Congress

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170480

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Lois Frankel for Congress

Mailing Address **Lillian Davis**
108 Boulder Rd

City **Plymouth Meeting** State **PA** Zip Code **19462**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Lois Frankel for Congress

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170481

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 84.00 |
|-------|

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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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Lois Frankel for Congress | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Elizabeth Niccolls 800 S 15th St Unit 1631 | | Transaction ID : SB23-170482 |
| City Sebring State OH Zip Code 44672 | Amount of Each Disbursement this Period 14.29 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Lois Frankel for Congress | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Committee to Elect Michelle Lujan Grisham | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Craig Auster 70 I Street SE Apt. 803 | | Transaction ID : SB23-170484 |
| City Washington State DC Zip Code 20003 | Amount of Each Disbursement this Period 10.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Committee to Elect Michelle Lujan Grisham | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Friends of Mazie Hirono | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Cynthia Arnold PO Box 14473 | | Transaction ID : SB23-170485 |
| City San Francisco State CA Zip Code 94114 | Amount of Each Disbursement this Period 25.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Friends of Mazie Hirono | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 49.29 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Friends of Mazie Hirono

Mailing Address Elizabeth Niccolls
800 S 15th St Unit 1631

City Sebring State OH Zip Code 44672

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Friends of Mazie Hirono

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2011

Transaction ID : SB23-170486

Amount of Each Disbursement this Period

14.28

Full Name (Last, First, Middle Initial)

B. Kirkpatrick for Congress

Mailing Address Cynthia Arnold
PO Box 14473

City San Francisco State CA Zip Code 94114

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Kirkpatrick for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2011

Transaction ID : SB23-170487

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. Kirkpatrick for Congress

Mailing Address Lillian Davis
108 Boulder Rd

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Kirkpatrick for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2011

Transaction ID : SB23-170488

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

44.28

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Kirkpatrick for Congress

Mailing Address Elizabeth Niccolls
800 S 15th St Unit 1631

City Sebring State OH Zip Code 44672

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Kirkpatrick for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170489

Amount of Each Disbursement this Period

| |
|-------|
| 14.28 |
|-------|

Full Name (Last, First, Middle Initial)

B. Klobuchar for Minnesota

Mailing Address Lois Chaffee
248 East 7th Street

City New York State NY Zip Code 10009

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Klobuchar for Minnesota

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170491

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Klobuchar for Minnesota

Mailing Address Gino Crocetti
652 w 163 st

City New York State NY Zip Code 10032

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Klobuchar for Minnesota

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170492

Amount of Each Disbursement this Period

| |
|-------|
| 40.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 79.28 |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Anne McLane Kuster for Congress

Mailing Address Cynthia Arnold
PO Box 14473

City San Francisco State CA Zip Code 94114

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Anne McLane Kuster for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170493

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Anne McLane Kuster for Congress

Mailing Address Lillian Davis
108 Boulder Rd

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Anne McLane Kuster for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170494

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Full Name (Last, First, Middle Initial)

C. Anne McLane Kuster for Congress

Mailing Address Elizabeth Nicolls
800 S 15th St Unit 1631

City Sebring State OH Zip Code 44672

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Anne McLane Kuster for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170495

Amount of Each Disbursement this Period

| |
|-------|
| 14.29 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

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|-------|
| 44.29 |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Titus for Congress

Mailing Address Christina Irwin
1309 Glenmorrie Drive

City Lake Oswego State OR Zip Code 97034

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Titus for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : **SB23-170497**

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

Full Name (Last, First, Middle Initial)

B. Titus for Congress

Mailing Address Lois Chaffee
248 East 7th Street

City New York State NY Zip Code 10009

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Titus for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : **SB23-170498**

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Titus for Congress

Mailing Address Alison Schiff
41 West 96

City New York State NY Zip Code 10025

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Titus for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : **SB23-170499**

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 55.00 |
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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Titus for Congress

Mailing Address Gino Crocetti
652 w 163 st

City New York State NY Zip Code 10032

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Titus for Congress

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170500

Amount of Each Disbursement this Period

| |
|-------|
| 40.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Christie Vilsack for Iowa

Mailing Address Cynthia Arnold
PO Box 14473

City San Francisco State CA Zip Code 94114

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Christie Vilsack for Iowa

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170501

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Christie Vilsack for Iowa

Mailing Address Lillian Davis
108 Boulder Rd

City Plymouth Meeting State PA Zip Code 19462

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Christie Vilsack for Iowa

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170502

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 70.00 |
|-------|

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 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)
EMILY's List

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Christie Vilsack for Iowa | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Elizabeth Nicolls 800 S 15th St Unit 1631 | | Transaction ID : SB23-170503 |
| City Sebring State OH Zip Code 44672 | Amount of Each Disbursement this Period 14.29 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Christie Vilsack for Iowa | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Gloria Gray 436 Crestover Circle | | Transaction ID : SB23-170504 |
| City Richardson State TX Zip Code 75080 | Amount of Each Disbursement this Period 20.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Susan Kirschenbaum 1783 South Rd. | | Transaction ID : SB23-170505 |
| City Kingston State RI Zip Code 02881 | Amount of Each Disbursement this Period 100.00 | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/Type | |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 134.29 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Martha Brown
6879 Highway 49 N.

City Mariposa State CA Zip Code 95338

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170506

Amount of Each Disbursement this Period

| |
|--------|
| 250.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Nancy Richards
5207 Church Drive

City Charleston State WV Zip Code 25306

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170507

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Peg French
544 Kemmerer Road

City State College State PA Zip Code 16801

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170508

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 320.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Carol Cooper
58 Grandview Ave.

City Kingston State NY Zip Code 12401

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170509

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Rosemarie Sheperd
2 West 3rd Ave.

City Johnstown State NY Zip Code 12095

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170510

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Marciarose Shestack
2201 Pennsylvania Avenue

City Philadelphia State PA Zip Code 19130

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170511

Amount of Each Disbursement this Period

| |
|-------|
| 16.66 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 76.66 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Sally Levinson
2985 Pacific Avenue Apt. 8

City San Francisco State CA Zip Code 94115

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170512

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Sydney Story
205 E Terrace Ave

City Fresno State CA Zip Code 93704

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170513

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Chrystyne Braaten
1222 SW Leschi DR

City Oak Harbor State WA Zip Code 98277

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170514

Amount of Each Disbursement this Period

| |
|------|
| 2.00 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 37.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Charlotte Alexandre
10345 Adams Pl

City Thornton State CO Zip Code 80229

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170515

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Mithlesh Prakash
2665 Condor Cir

City Corona State CA Zip Code 92882

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170516

Amount of Each Disbursement this Period

| |
|------|
| 8.50 |
|------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Ellen Tirone
12 Edendale Ln

City Durham State NH Zip Code 03824

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170517

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 28.50 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Barry Weyburn
PO Box 388

City Rock Hall State MD Zip Code 21661

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170518

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address W. Greer
307 Scottholm Blvd

City Syracuse State NY Zip Code 13224

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170519

Amount of Each Disbursement this Period

| |
|------|
| 4.00 |
|------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Fred Martin
55 Holmes Ranch Rd PO Box 328

City Philo State CA Zip Code 95466

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170520

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 74.00 |
|-------|

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Barbara Carr
3266 Chamberlain Cir.

City Ann Arbor State MI Zip Code 48103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170521

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Louise Weschler
161 Richdale Rd

City Colts Neck State NJ Zip Code 07722

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170522

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Edward Merrilees
150 McKnight Drive

City Laguna Beach State CA Zip Code 92651

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170523

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 225.00 |
|--------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Frederick Phillips
1939 Jefferson St., Apt. 101

City Hollywood State FL Zip Code 33020

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 1 | 2 | | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-170524

Amount of Each Disbursement this Period

| | | | |
|---|---|---|---|
| 2 | . | 5 | 0 |
|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Charlotte Stone
2428 Sandell Dr

City Atlanta State GA Zip Code 30338

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 1 | 2 | | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-170525

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 2 | 5 | . | 0 | 0 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Judith Rogovin
4556 Forest Wood Trl

City Sarasota State FL Zip Code 34241

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 1 | 2 | | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-170526

Amount of Each Disbursement this Period

| | | | |
|---|---|---|---|
| 0 | . | 8 | 3 |
|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| | | | | |
|---|---|---|---|---|
| 2 | 8 | . | 3 | 3 |
|---|---|---|---|---|

TOTAL This Period (last page this line number only)..... ▶

| | | | | |
|---|---|---|---|---|
| 2 | 8 | . | 3 | 3 |
|---|---|---|---|---|

**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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Robert Schor
10 Ambassador Drive

City Rochester State NY Zip Code 14610

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170527

Amount of Each Disbursement this Period

| |
|--------|
| 166.66 |
|--------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Clair Sharpless
1 Drumlin Rd.

City West Simsbury State CT Zip Code 06092

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170528

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Elizabeth for MA Inc

Mailing Address Bernard Shyffer
4212 Palos Verdes Drive E

City Rancho Pls. Vrd. State CA Zip Code 90275

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170529

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 366.66 |
|--------|

| |
|--|
| |
|--|

**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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Bernice Horn 929 Stratford Avenue | | Transaction ID : SB23-170530 |
| City Melrose Park | State PA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 25.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Elizabeth Williams 28 Olmstead Green Court | | Transaction ID : SB23-170531 |
| City Baltimore | State MD | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 30.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Nancy Anderson 245 N Vine St Apt 903 | | Transaction ID : SB23-170532 |
| City Salt Lake City | State UT | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 10.00 |
| Candidate Name Elizabeth for MA Inc | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: _____ | District: _____ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 65.00 |
| 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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Nancy Boney 10 Allen Road | | Transaction ID : SB23-170533 |
| City Bridgewater | State NJ | |
| Zip Code 08807 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 12.50 |
| Candidate Name Elizabeth for MA Inc | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Judy Hunter 3586 Indigo Pond Dr | | Transaction ID : SB23-170534 |
| City Palm Harbor | State FL | |
| Zip Code 34685 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 1.66 |
| Candidate Name Elizabeth for MA Inc | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth for MA Inc | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Carl Weinberg 42 Green Oaks Ct. | | Transaction ID : SB23-170535 |
| City Walnut Creek | State CA | |
| Zip Code 94596 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name Elizabeth for MA Inc | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 34.16 |
| 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. Elizabeth for MA Inc

Mailing Address Eleanor Weiss
360 Osgood Road

City Milford State NH Zip Code 03055

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170536

Amount of Each Disbursement this Period

| |
|-------|
| 30.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. Elizabeth for MA Inc

Mailing Address Marian Ryan
2460 Linette Ct

City Yorktown Heights State NY Zip Code 10598

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
Elizabeth for MA Inc

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170537

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Martha Brown
6879 Highway 49 N.

City Mariposa State CA Zip Code 95338

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170538

Amount of Each Disbursement this Period

| |
|--------|
| 250.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 300.00 |
|--------|

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| |
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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)
EMILY's List

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Carol Cooper 58 Grandview Ave. | | Transaction ID : SB23-170542 |
| City Kingston | State NY | |
| Zip Code 12401 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 10.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Rosemarie Sheperd 2 West 3rd Ave. | | Transaction ID : SB23-170543 |
| City Johnstown | State NY | |
| Zip Code 12095 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 50.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Ken Blanning 4510 Katie Ln | | Transaction ID : SB23-170544 |
| City Orlando | State FL | |
| Zip Code 32806 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 10.00 |
| Candidate Name McCaskill for Missouri | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Category/ Type |
| Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 70.00 |
| 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 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)
EMILY's List

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2011 |
| Mailing Address Marciarose Shestack 2201 Pennsylvania Avenue | | Transaction ID : SB23-170545 Amount of Each Disbursement this Period 16.67 |
| City Philadelphia State PA Zip Code 19130 | | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2011 |
| Mailing Address Sydney Story 205 E Terrace Ave | | Transaction ID : SB23-170546 Amount of Each Disbursement this Period 10.00 |
| City Fresno State CA Zip Code 93704 | | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2011 |
| Mailing Address Chrystyne Braaten 1222 SW Leschi DR | | Transaction ID : SB23-170547 Amount of Each Disbursement this Period 1.00 |
| City Oak Harbor State WA Zip Code 98277 | | |
| Purpose of Disbursement Candidate Contrib Earmarked | Category/ Type | |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|---|-------|
| SUBTOTAL of Disbursements This Page (optional)..... ▶ | 27.67 |
| TOTAL This Period (last page this line number only)..... ▶ | 27.67 |

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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Charlotte Alexandre
10345 Adams Pl

City Thornton State CO Zip Code 80229

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : SB23-170548

Amount of Each Disbursement this Period

10.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Mithlesh Prakash
2665 Condor Cir

City Corona State CA Zip Code 92882

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : SB23-170549

Amount of Each Disbursement this Period

33.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Ellen Tirone
12 Edendale Ln

City Durham State NH Zip Code 03824

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 22 / 2011

Transaction ID : SB23-170550

Amount of Each Disbursement this Period

10.00

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

53.00

**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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Barry Weyburn
PO Box 388

City Rock Hall State MD Zip Code 21661

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 2 | 2 | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-170551

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 5 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Fred Martin
55 Holmes Ranch Rd PO Box 328

City Philo State CA Zip Code 95466

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 2 | 2 | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-170552

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 2 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Barbara Carr
3266 Chamberlain Cir.

City Ann Arbor State MI Zip Code 48103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name

McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 2 | 2 | | 2 | 0 | 1 | 1 | | |

Transaction ID : SB23-170553

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 1 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| | | | | | |
|---|---|---|---|---|---|
| 1 | 7 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

TOTAL This Period (last page this line number only)..... ▶

| | | | | | |
|---|---|---|---|---|---|
| 1 | 7 | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Sally Levinson
2985 Pacific Avenue Apt. 8

City San Francisco State CA Zip Code 94115

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 1 | 2 | | | 2 | 0 | 1 | 1 | | |

Transaction ID : **SB23-170557**

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 2 | 5 | . | 0 | 0 |
|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Clair Sharpless
1 Drumlin Rd.

City West Simsbury State CT Zip Code 06092

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 1 | 2 | | | 2 | 0 | 1 | 1 | | |

Transaction ID : **SB23-170558**

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 1 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Bernard Shyffer
4212 Palos Verdes Drive E

City Rancho Pls. Vrd. State CA Zip Code 90275

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 | | | 1 | 2 | | | 2 | 0 | 1 | 1 | | |

Transaction ID : **SB23-170559**

Amount of Each Disbursement this Period

| | | | | | |
|---|---|---|---|---|---|
| 1 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| | | | | | |
|---|---|---|---|---|---|
| 2 | 2 | 5 | . | 0 | 0 |
|---|---|---|---|---|---|

| | | | | | |
|---|---|---|---|---|---|
| 2 | 2 | 5 | . | 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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. McCaskill for Missouri

Mailing Address Bernice Horn
929 Stratford Avenue

City Melrose Park State PA Zip Code 19027

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170560

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. McCaskill for Missouri

Mailing Address Nancy Anderson
245 N Vine St Apt 903

City Salt Lake City State UT Zip Code 84103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170561

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. McCaskill for Missouri

Mailing Address Nancy Boney
10 Allen Road

City Bridgewater State NJ Zip Code 08807

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
McCaskill for Missouri

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170562

Amount of Each Disbursement this Period

| |
|-------|
| 12.50 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

| |
|-------|
| 47.50 |
|-------|

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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Judy Hunter 3586 Indigo Pond Dr | | Transaction ID : SB23-170563 |
| City Palm Harbor | State FL | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 1.67 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Carl Weinberg 42 Green Oaks Ct. | | Transaction ID : SB23-170564 |
| City Walnut Creek | State CA | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 20.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Eleanor Weiss 360 Osgood Road | | Transaction ID : SB23-170565 |
| City Milford | State NH | |
| Purpose of Disbursement Candidate Contrib Earmarked | | Amount of Each Disbursement this Period 30.00 |
| Candidate Name McCaskill for Missouri | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

51.67

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 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)
EMILY's List

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Marian Ryan 2460 Linette Ct | | Transaction ID : SB23-170566 |
| City Yorktown Heights | State NY | |
| Zip Code 10598 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name McCaskill for Missouri | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Gloria Gray 436 Crestover Circle | | Transaction ID : SB23-170567 |
| City Richardson | State TX | |
| Zip Code 75080 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 20.00 |
| Candidate Name McCaskill for Missouri | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. McCaskill for Missouri | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address Robert Schor 10 Ambassador Drive | | Transaction ID : SB23-170568 |
| City Rochester | State NY | |
| Zip Code 14610 | Purpose of Disbursement Candidate Contrib Earmarked | Amount of Each Disbursement this Period 166.67 |
| Candidate Name McCaskill for Missouri | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

206.67

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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Gloria Gray
436 Crestover Circle

City Richardson State TX Zip Code 75080

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170569

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Nancy Richards
5207 Church Drive

City Charleston State WV Zip Code 25306

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170570

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Peg French
544 Kemmerer Road

City State College State PA Zip Code 16801

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170571

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 65.00 |
|-------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Carol Cooper
58 Grandview Ave.

City Kingston State NY Zip Code 12401

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : **SB23-170572**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Rosemarie Sheperd
2 West 3rd Ave.

City Johnstown State NY Zip Code 12095

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : **SB23-170573**

Amount of Each Disbursement this Period

| |
|-------|
| 50.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Ken Blanning
4510 Katie Ln

City Orlando State FL Zip Code 32806

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : **SB23-170574**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 70.00 |
|-------|

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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 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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Marciarose Shestack
2201 Pennsylvania Avenue

City Philadelphia State PA Zip Code 19130

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : **SB23-170575**

Amount of Each Disbursement this Period

| |
|-------|
| 16.67 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Sydney Story
205 E Terrace Ave

City Fresno State CA Zip Code 93704

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : **SB23-170576**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Charlotte Alexandre
10345 Adams Pl

City Thornton State CO Zip Code 80229

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : **SB23-170577**

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 36.67 |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address **Mithlesh Prakash**
2665 Condor Cir

City **Corona** State **CA** Zip Code **92882**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170578

Amount of Each Disbursement this Period

| |
|------|
| 8.50 |
|------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address **Ellen Tirone**
12 Edendale Ln

City **Durham** State **NH** Zip Code **03824**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170579

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address **Fred Martin**
55 Holmes Ranch Rd PO Box 328

City **Philo** State **CA** Zip Code **95466**

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170580

Amount of Each Disbursement this Period

| |
|-------|
| 20.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 38.50 |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Louise Weschler
161 Richdale Rd

City State Zip Code
Colts Neck NJ 07722

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170581

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Frederick Phillips
1939 Jefferson St., Apt. 101

City State Zip Code
Hollywood FL 33020

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170582

Amount of Each Disbursement this Period

| |
|------|
| 2.50 |
|------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Charlotte Stone
2428 Sandell Dr

City State Zip Code
Atlanta GA 30338

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 12 | | | 22 | | | 2011 | | | |

Transaction ID : SB23-170583

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 52.50 |
|-------|

| |
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| |
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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Judith Rogovin
4556 Forest Wood Trl

City Sarasota State FL Zip Code 34241

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : **SB23-170584**

Amount of Each Disbursement this Period

| |
|------|
| 0.83 |
|------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Robert Schor
10 Ambassador Drive

City Rochester State NY Zip Code 14610

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : **SB23-170585**

Amount of Each Disbursement this Period

| |
|--------|
| 166.67 |
|--------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Clair Sharpless
1 Drumlin Rd.

City West Simsbury State CT Zip Code 06092

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : **SB23-170586**

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 267.50 |
|--------|

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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)
EMILY's List

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address Bernard Shyffer
4212 Palos Verdes Drive E

City Rancho Pls. Vrd. State CA Zip Code 90275

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170587

Amount of Each Disbursement this Period

| |
|--------|
| 100.00 |
|--------|

Full Name (Last, First, Middle Initial)

B. VAL DEMINGS FOR CONGRESS

Mailing Address Nancy Anderson
245 N Vine St Apt 903

City Salt Lake City State UT Zip Code 84103

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170588

Amount of Each Disbursement this Period

| |
|-------|
| 10.00 |
|-------|

Full Name (Last, First, Middle Initial)

C. VAL DEMINGS FOR CONGRESS

Mailing Address Judy Hunter
3586 Indigo Pond Dr

City Palm Harbor State FL Zip Code 34685

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 12 | | 22 | | 2011 |

Transaction ID : SB23-170589

Amount of Each Disbursement this Period

| |
|------|
| 1.67 |
|------|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 111.67 |
|--------|

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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)
EMILY's List

A. VAL DEMINGS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address Carl Weinberg
42 Green Oaks Ct.

City Walnut Creek State CA Zip Code 94596

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2011

Transaction ID : SB23-170590

Amount of Each Disbursement this Period: 20.00

Category/Type

B. VAL DEMINGS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address Marian Ryan
2460 Linette Ct

City Yorktown Heights State NY Zip Code 10598

Purpose of Disbursement
Candidate Contrib Earmarked

Candidate Name
VAL DEMINGS FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2011

Transaction ID : SB23-170591

Amount of Each Disbursement this Period: 20.00

Category/Type

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

Amount of Each Disbursement this Period

Category/Type

| | |
|--|-----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 40.00 |
| TOTAL This Period (last page this line number only).....▶ | 126845.50 |

**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 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. Albert Rice | | Date of Disbursement MM / DD / YYYY 12 / 03 / 2011 |
| Mailing Address 495 S Augustine Ave | | Transaction ID : SB28A-171113 |
| City Claremont | State CA | |
| Zip Code 91711 | Purpose of Disbursement Refund | Amount of Each Disbursement this Period 25.00 |
| 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. Caroline Lareuse | | Date of Disbursement MM / DD / YYYY 12 / 05 / 2011 |
| Mailing Address 256 Shadybrook Ln | | Transaction ID : SB28A-171114 |
| City Princeton | State NJ | |
| Zip Code 08540 | Purpose of Disbursement Refund | Amount of Each Disbursement this Period 25.00 |
| 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. Horace Russell | | Date of Disbursement MM / DD / YYYY 12 / 05 / 2011 |
| Mailing Address 348 Old Firetower Rd | | Transaction ID : SB28A-171115 |
| City Bastrop | State TX | |
| Zip Code 78602 | Purpose of Disbursement Refund | Amount of Each Disbursement this Period 140.00 |
| 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)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 190.00 |
| |

**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 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. Horace Russell | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address 348 Old Firetower Rd | | Transaction ID : SB28A-169455 |
| City Bastrop | State TX | |
| Purpose of Disbursement Refund | Candidate Name | Amount of Each Disbursement this Period 35.00 |
| 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. Marcie Bierlein | | Date of Disbursement MM / DD / YYYY 12 / 08 / 2011 |
| Mailing Address 5 Wellington Rd | | Transaction ID : SB28A-171117 |
| City Wilmington | State DE | |
| Purpose of Disbursement Refund | Candidate Name | Amount of Each Disbursement this Period 100.00 |
| 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. Gayle Campbell | | Date of Disbursement MM / DD / YYYY 12 / 12 / 2011 |
| Mailing Address 2453 Skyline Dr | | Transaction ID : SB28A-171116 |
| City Salt Lake City | State UT | |
| 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 | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 185.00 |
| 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. Elizabeth Anderson | | Date of Disbursement MM / DD / YYYY 12 / 19 / 2011 |
| Mailing Address 114 North Kuakini | | Transaction ID : SB28A-171118 |
| City Honolulu | State HI Zip Code 96817 | |
| 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. Corrine Calessio | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address 189 Braodway | | Transaction ID : SB28A-171119 |
| City Dobbs Ferry | State NY Zip Code 10522 | |
| Purpose of Disbursement Refund | Candidate Name | Amount of Each Disbursement this Period 200.00 |
| 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. Sharon Kime | | Date of Disbursement MM / DD / YYYY 12 / 22 / 2011 |
| Mailing Address 12 William Ct | | Transaction ID : SB28A-171120 |
| City Sausalito | State CA Zip Code 94965 | |
| 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).....▶ | 235.00 |
| 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. Dorothy Steichen

Mailing Address 1104 6th Ave

City State Zip Code
Great Falls MT 59401

Purpose of Disbursement
Refund

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 |
| 12 | | | 23 | | | 2011 | | | | | |

Transaction ID : SB28A-171121

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| | | | | | | | | | | | |

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| | | | | | | | | | | | |

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|-------|
| 25.00 |
|-------|

| |
|--------|
| 635.00 |
|--------|

**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. Lillian's List

Mailing Address 234 Fayetteville Street
Ste 600

City Raleigh State NC Zip Code 27602

Purpose of Disbursement
Committee Contribution

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
12 / 01 / 2011

Transaction ID : SB29-169383

Amount of Each Disbursement this Period

1000.00

NC

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

M M M / D D D / Y Y Y Y Y Y
12 / 07 / 2011

Transaction ID : SB29-170962

Amount of Each Disbursement this Period

1000.00

J Burkholder Orig Rec 11/16/11

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

M M M / D D D / Y Y Y Y Y Y
12 / 07 / 2011

Transaction ID : SB29-170972

Amount of Each Disbursement this Period

15000.00

C Rhodes Orig Cntrb 11/14

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

17000.00

**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 | | Date of Disbursement MM / DD / YYYY 12 / 07 / 2011 |
| Mailing Address 1120 Connecticut Ave NW Suite 1100 | | Transaction ID : SB29-170963 |
| City Washington State DC Zip Code 20036 | Amount of Each Disbursement this Period 1000.00 | |
| Purpose of Disbursement Transfer to Non-Federal Fund | Candidate Name | P Cherner Orig Rec 11/14/11 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. EMILY's List Non-Federal #3 | | Date of Disbursement MM / DD / YYYY 12 / 07 / 2011 |
| Mailing Address 1120 Connecticut Ave NW Suite 1100 | | Transaction ID : SB29-170959 |
| City Washington State DC Zip Code 20036 | Amount of Each Disbursement this Period 2500.00 | |
| Purpose of Disbursement Transfer to Non-Federal Fund | Candidate Name | S Almy Orig Rec 11/7/11 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. EMILY's List Non-Federal #3 | | Date of Disbursement MM / DD / YYYY 12 / 07 / 2011 |
| Mailing Address 1120 Connecticut Ave NW Suite 1100 | | Transaction ID : SB29-170961 |
| City Washington State DC Zip Code 20036 | Amount of Each Disbursement this Period 5000.00 | |
| Purpose of Disbursement Transfer to Non-Federal Fund | Candidate Name | N Buc Orig Rec 11/14/11 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 8500.00 |
| 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

/ /

Transaction ID : SB29-170968

Amount of Each Disbursement this Period

M Simpson Orig Rec 11/9/11

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 : SB29-170960

Amount of Each Disbursement this Period

C Baker Orig Rec 11/9/11

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 : SB29-170966

Amount of Each Disbursement this Period

A Palladino Orig Rec 11/7/11

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 12 / 07 / 2011 |
| Mailing Address 1120 Connecticut Ave NW Suite 1100 | | Transaction ID : SB29-170969 |
| City Washington State DC Zip Code 20036 | Amount of Each Disbursement this Period 881.25 | |
| Purpose of Disbursement Transfer to Non-Federal Fund | Candidate Name | M Thomas Orig Rec 11/1/11 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. EMILY's List Non-Federal #3 | | Date of Disbursement MM / DD / YYYY 12 / 07 / 2011 |
| Mailing Address 1120 Connecticut Ave NW Suite 1100 | | Transaction ID : SB29-170964 |
| City Washington State DC Zip Code 20036 | Amount of Each Disbursement this Period 500.00 | |
| Purpose of Disbursement Transfer to Non-Federal Fund | Candidate Name | M Weissman Orig Rec 11/17 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. EMILY's List Non-Federal #3 | | Date of Disbursement MM / DD / YYYY 12 / 07 / 2011 |
| Mailing Address 1120 Connecticut Ave NW Suite 1100 | | Transaction ID : SB29-170965 |
| City Washington State DC Zip Code 20036 | Amount of Each Disbursement this Period 5000.00 | |
| Purpose of Disbursement Transfer to Non-Federal Fund | Candidate Name | M Gray Orig Rec 11/9/11 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 6381.25 |
| 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 #1

Mailing Address 1120 Connecticut Ave NW
Suite 1100

City Washington State DC Zip Code 20036

Purpose of Disbursement
Contributions

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 |
| 12 | | 08 | | 2011 |

Transaction ID : SB29-169432

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

G Fairchild Orig Rec 11/17/11

Full Name (Last, First, Middle Initial)

B. North Carolina Democratic Party Non-Federal

Mailing Address 220 Hillsborough Street

City Raleigh State NC Zip Code 27603

Purpose of Disbursement
Committee Contribution

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 |
| 12 | | 21 | | 2011 |

Transaction ID : SB29-170367

Amount of Each Disbursement this Period

| |
|----------|
| 10000.00 |
|----------|

NC

Full Name (Last, First, Middle Initial)

C. Friends of Susan Sokol Blosser

Mailing Address PO Box 1307

City McMinnville State OR Zip Code 97128

Purpose of Disbursement
Void Check Cand Contribution

Candidate Name

Friends of Susan Sokol Blosser

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 |
| 12 | | 31 | | 2011 |

Transaction ID : SB29-170640

Amount of Each Disbursement this Period

| |
|----------|
| -1000.00 |
|----------|

OR-Secretary of State

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|----------|
| 99500.00 |
|----------|

| |
|--|
| |
|--|

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

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2011 |

Transaction ID : SB29-170971

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

Transfer

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | / | | / | |

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| | / | | / | |

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|--------|
| 500.00 |
|--------|

| |
|-----------|
| 136381.25 |
|-----------|

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **EMILY's List** Transaction ID : SC-EL-1705

| | |
|---|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Bank of America | Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 730 15th Street NW | |
| City Washington State DC ZIP Code 20005 | |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 0.00 | 0.00 | 0.00 |

TERMS

Date Incurred: M M / D D / Y Y Y Y Y Y / /

Date Due: M M / D D / Y Y Y Y Y Y

Interest Rate: % (apr)

Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

| | |
|--|---|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |

| | |
|--|------|
| SUBTOTALS This Period This Page (optional)..... ▶ | 0.00 |
| TOTALS This Period (last page in this line only)..... ▶ | 0.00 |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3X)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page ___ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) Transaction ID : SC1-10000
EMILY's List
FEC IDENTIFICATION NUMBER
C C00193433

LENDING INSTITUTION (LENDER) Amount of Loan Interest Rate (APR)
Full Name Bank of America
750000.00
Libor + 3 %

Mailing Address Date Incurred or Established
730 15th Street NW 12 / 01 / 2011
City State Zip Code Date Due
Washington DC 20005 09 / 30 / 2013
Back Ref SC-EL-1705

A. Has loan been restructured? No Yes
If yes, date originally incurred 03 / 23 / 2010

B. If line of credit, Total Outstanding Balance:
Amount of this Draw: 0.00 0.00

C. Are other parties secondarily liable for the debt incurred?
No Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
What is the value of this collateral? 750000.00
Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes
What is the estimated value? 0.00

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).

Location of account: Bank of America

Date account established:

Address: 730 15th Street NW

12 / 01 / 2011

City, State, Zip: Washington DC 20005

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER DATE
Typed Name Signature Caroline Fines
01 / 31 / 2012

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:
I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE [Electronically Filed] DATE
Typed Name Signature Patricia Conley
Title Sr Credit Supp Assoc
01 / 31 / 2012

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 2011 ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported Transaction ID : H2-EL-1706 | FEDERAL % <input type="text" value="50.00"/> % | NONFEDERAL % <input type="text" value="50.00"/> % |
| 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 % <input type="text"/> % | NONFEDERAL % <input type="text"/> % |
| 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 % <input type="text"/> % | NONFEDERAL % <input type="text"/> % |
| 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 % <input type="text"/> % | NONFEDERAL % <input type="text"/> % |
| 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 % <input type="text"/> % | NONFEDERAL % <input type="text"/> % |
| 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 % <input type="text"/> % | NONFEDERAL % <input type="text"/> % |

**SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
EMILY's List

| NAME OF ACCOUNT | DATE OF RECEIPT | TOTAL AMOUNT TRANSFERRED |
|----------------------|----------------------------------|--------------------------|
| Bank of America-NF#3 | MM / DD / YYYY 12 / 13 / 2011 | 266237.58 |

BREAKDOWN OF TRANSFER RECEIVED

| | |
|--|------------------------------------|
| i) Total Administrative | 200000.00 |
| | Transaction ID : H3-EL-1707 |
| ii) Generic Voter Drive | |
| iii) Exempt Activities | |
| iv) Direct Fundraising (List Activity or Event Identifier) | |
| a) PSP11 | 66237.58 |
| | Transaction ID : H3-EL-1708 |
| b) | |
| c) Total Amount Transferred For Direct Fundraising | 66237.58 |
| v) Direct Candidate Support (List Activity or Event Identifier) | |
| a) | |
| b) | |
| c) Total Amount Transferred For Direct Candidate Support | |
| vi) Public Communications Referring Only to Party (Made by PAC) | |

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

| | |
|--|--|
| TOTAL This Period (Administrative) | |
| TOTAL This Period (Generic Voter Drive) | |
| TOTAL This Period (Exempt Activities) | |
| TOTAL This Period (Direct Fundraising) | |
| TOTAL This Period (Direct Candidate Support) | |
| TOTAL This Period (Public Communications Referring Only to Party) | |
| TOTAL This Period (Total Amount Transferred) | |

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 EMILY's List

| | | |
|---------------------------------------|---|---------------------------------------|
| NAME OF ACCOUNT Merrill Lynch-NF#4 | DATE OF RECEIPT MM / DD / YYYY 12 / 15 / 2011 | TOTAL AMOUNT TRANSFERRED 300000.00 |
|---------------------------------------|---|---------------------------------------|

BREAKDOWN OF TRANSFER RECEIVED

| | |
|--|-----------|
| i) Total Administrative | 300000.00 |
| Transaction ID : H3-EL-1709 | |
| ii) Generic Voter Drive | |
| iii) Exempt Activities | |
| iv) Direct Fundraising (List Activity or Event Identifier) | |
| a) PSP11 | 0.00 |
| Transaction ID : H3-EL-1710 | |
| b) | |
| c) Total Amount Transferred For Direct Fundraising | |
| v) Direct Candidate Support (List Activity or Event Identifier) | |
| a) | |
| b) | |
| c) Total Amount Transferred For Direct Candidate Support | |
| vi) Public Communications Referring Only to Party (Made by PAC) | |

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

| | |
|--|-----------|
| TOTAL This Period (Administrative) | 500000.00 |
| TOTAL This Period (Generic Voter Drive) | 0.00 |
| TOTAL This Period (Exempt Activities) | 0.00 |
| TOTAL This Period (Direct Fundraising) | 66237.58 |
| TOTAL This Period (Direct Candidate Support) | 0.00 |
| TOTAL This Period (Public Communications Referring Only to Party) | 0.00 |
| TOTAL This Period (Total Amount Transferred) | 566237.58 |

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

EMILY's List

Form A: Lizzie Cooper, Transaction ID: H4-169373. Includes fields for Name, Address, City/State/Zip, Purpose (Travel/Meals), Activity Identifier (PSP11), and Allocated Activity (Fundraising checked). Totals: FEDERAL SHARE 9.00, NONFEDERAL SHARE 9.00, TOTAL AMOUNT 18.00.

Form B: Federal Express, Transaction ID: H4-169376. Includes fields for Name, Address, City/State/Zip, Purpose (Deliveries), Activity Identifier (PSP11), and Allocated Activity (Fundraising checked). Totals: FEDERAL SHARE 13.38, NONFEDERAL SHARE 13.39, TOTAL AMOUNT 26.77.

Form C: Kelly Glynn, Transaction ID: H4-169378. Includes fields for Name, Address, City/State/Zip, Purpose (Travel/Meals), Activity Identifier (PSP11), and Allocated Activity (Fundraising checked). Totals: FEDERAL SHARE 10.93, NONFEDERAL SHARE 10.94, TOTAL AMOUNT 21.87.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 33.31, NONFEDERAL SHARE 33.33, TOTAL AMOUNT 66.64.

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

Form A: Anna Lidman, Transaction ID: H4-169382. Allocated Activity or Event: Fundraising. Date: 12/01/2011. Total Amount: 39.09.

Form B: Production Solutions, Inc., Transaction ID: H4-169388. Allocated Activity or Event: Fundraising. Date: 12/01/2011. Total Amount: 528.75.

Form C: Production Solutions, Inc., Transaction ID: H4-169390. Allocated Activity or Event: Fundraising. Date: 12/01/2011. Total Amount: 15.22.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 291.52, 291.54, 583.06.

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: H4-169391. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Printing), Activity or Event Identifier (PSP11), Allocated Activity or Event (Fundraising checked), and Year-To-Date amounts (937.85 Federal, 937.85 Nonfederal, 1875.70 Total).

Form B: Production Solutions, Inc. Transaction ID: H4-169392. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Postage Credit), Activity or Event Identifier (PSP11), Allocated Activity or Event (Fundraising checked), and Year-To-Date amounts (-68.86 Federal, -68.86 Nonfederal, -137.72 Total).

Form C: Production Solutions, Inc. Transaction ID: H4-169393. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement (Printing), Activity or Event Identifier (PSP11), Allocated Activity or Event (Fundraising checked), and Year-To-Date amounts (420.50 Federal, 420.51 Nonfederal, 841.01 Total).

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for subtotal: FEDERAL SHARE 1289.49, NONFEDERAL SHARE 1289.50, TOTAL AMOUNT 2578.99.

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

Form A: RMZ Holdings Attn: KG Consulting. Transaction ID: H4-169396. Allocated Activity or Event: Fundraising. Year-To-Date: 677688.76. Date: 12/01/2011. Total Amount: 7500.00.

Form B: Rue Group, LLC. Transaction ID: H4-169397. Allocated Activity or Event: Fundraising. Year-To-Date: 682688.76. Date: 12/01/2011. Total Amount: 5000.00.

Form C: Cornucopia, Inc. Transaction ID: H4-169412. Allocated Activity or Event: Fundraising. Year-To-Date: 712965.96. Date: 12/07/2011. Total Amount: 30277.20.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 21388.60, 21388.60, 42777.20.

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) Emily Brown | | Transaction ID : H4-169418 | | Allocated Activity or Event: | |
| Mailing Address 9 Logan Circle | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City State Zip Code Washington DC 20005 | | | | <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: PSP11 | | Category/ Type | | Allocated Activity or Event Year-To-Date 713000.96 | |
| | | | | Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2011 | |
| FEDERAL SHARE | | + | | NONFEDERAL SHARE | |
| 17.50 | | | | 17.50 | |
| | | = | | TOTAL AMOUNT | |
| | | | | 35.00 | |

| | | | | | |
|--|--|----------------------------|--|---|--|
| B. Full Name (Last, First, Middle Initial) Campaign Team, Inc. c/o Anna Lidman | | Transaction ID : H4-169420 | | Allocated Activity or Event: | |
| Mailing Address 37 Brookview Terrace | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City State Zip Code Portland ME 04102 | | | | <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: PSP11 | | Category/ Type | | Allocated Activity or Event Year-To-Date 713049.44 | |
| | | | | Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2011 | |
| FEDERAL SHARE | | + | | NONFEDERAL SHARE | |
| 24.24 | | | | 24.24 | |
| | | = | | TOTAL AMOUNT | |
| | | | | 48.48 | |

| | | | | | |
|---|--|----------------------------|--|---|--|
| C. Full Name (Last, First, Middle Initial) Hirschberg Strategies, Inc | | Transaction ID : H4-169424 | | Allocated Activity or Event: | |
| Mailing Address 1010 Vermont Ave, NW Suite 814 | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City State Zip Code Washington DC 20005 | | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| Purpose of Disbursement: Consulting Fundraising | | | | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Activity or Event Identifier: PSP11 | | Category/ Type | | Allocated Activity or Event Year-To-Date 718049.44 | |
| | | | | Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2011 | |
| FEDERAL SHARE | | + | | NONFEDERAL SHARE | |
| 2500.00 | | | | 2500.00 | |
| | | = | | TOTAL AMOUNT | |
| | | | | 5000.00 | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 2541.74 | | 2541.74 | | 5083.48 |

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 : H4-169425 Hirschberg Strategies, 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 1010 Vermont Ave, NW Suite 814 | | Allocated Activity or Event Year-To-Date 718082.11 | |
| City Washington State DC Zip Code 20005 | Category/ Type | Date 12 / 08 / 2011 | |
| Purpose of Disbursement: Production-Printing Activity or Event Identifier: PSP11 | | FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 16.33 + 16.34 = 32.67 | |

| | | | |
|--|-------------------|--|--|
| B. Full Name (Last, First, Middle Initial) Transaction ID : H4-169436 Peggy Shapiro Graphic Design, 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 2555 N. Clark St. #206 | | Allocated Activity or Event Year-To-Date 720657.11 | |
| City Chicago State IL Zip Code 60614 | Category/ Type | Date 12 / 08 / 2011 | |
| Purpose of Disbursement: Design/Graphics Activity or Event Identifier: PSP11 | | FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 1287.50 + 1287.50 = 2575.00 | |

| | | | |
|--|-------------------|--|--|
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4-169438 Rylo Consulting | | 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 908 E. 5th St Suite 201 | | Allocated Activity or Event Year-To-Date 734657.11 | |
| City Austin State TX Zip Code 78702 | Category/ Type | Date 12 / 08 / 2011 | |
| Purpose of Disbursement: Consulting Fundraising Activity or Event Identifier: PSP11 | | FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 7000.00 + 7000.00 = 14000.00 | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 8303.83 | | 8303.84 | | 16607.67 |

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 : H4-169443 Staples Credit Plan Mailing Address PO Box 689020 | | 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 State Zip Code Des moines IA 50368 | Allocated Activity or Event Year-To-Date 734988.45 | | |
| Purpose of Disbursement: Office Supplies Expenses | <input type="checkbox"/> Category/ Type | Date <input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2011"/> | |
| Activity or Event Identifier: PSP11 | | | |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | | |
| <input type="text" value="165.67"/> + <input type="text" value="165.67"/> = <input type="text" value="331.34"/> | | | |

| | | | |
|--|---|--|--|
| B. Full Name (Last, First, Middle Initial) Transaction ID : H4-169445 Marissa Strickfaden Mailing Address 1100 First Street, SE #511 | | 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 State Zip Code Washington DC 20003 | Allocated Activity or Event Year-To-Date 735053.87 | | |
| Purpose of Disbursement: Printing | <input type="checkbox"/> Category/ Type | Date <input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2011"/> | |
| Activity or Event Identifier: PSP11 See Attached Memo Entry | | | |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | | |
| <input type="text" value="32.71"/> + <input type="text" value="32.71"/> = <input type="text" value="65.42"/> | | | |

| | | | |
|--|--|--|--|
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4-169445-10000 ABC Printing Mailing Address 2327 Union Street | | 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 State Zip Code Oaland CA 94612 | Allocated Activity or Event Year-To-Date | | |
| Purpose of Disbursement: Printing | <input type="checkbox"/> Category/ Type | Date <input type="text" value="12"/> / <input type="text" value="08"/> / <input type="text" value="2011"/> | |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | | | |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | | |
| <input type="text" value="32.71"/> + <input type="text" value="32.71"/> = <input type="text" value="65.42"/> | | | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|-------------------------------------|---|-------------------------------------|---|-------------------------------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| <input type="text" value="198.38"/> | | <input type="text" value="198.38"/> | | <input type="text" value="396.76"/> |

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) Marissa Strickfaden | | Transaction ID : H4-169446 | Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address 1100 First Street, SE #511 | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City Washington State DC Zip Code 20003 | | | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Purpose of Disbursement: Travel/Accommodation /Meals | | Category/ Type | Allocated Activity or Event Year-To-Date 735263.97 | |
| Activity or Event Identifier: PSP11 | | | Date 12 / 08 / 2011 | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 105.05 | | | 105.05 | |
| | | = | TOTAL AMOUNT | |
| | | | 210.10 | |

| | | | | |
|---|--|-----------------------------------|--|--|
| B. Full Name (Last, First, Middle Initial) Jennifer Ajluni | | Transaction ID : H4-169891 | Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address 3700 Massachusetts Ave NW #429 | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City Washington State DC Zip Code 20016 | | | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Purpose of Disbursement: Consulting Fundraising | | Category/ Type | Allocated Activity or Event Year-To-Date 735763.97 | |
| Activity or Event Identifier: PSP11 | | | Date 12 / 15 / 2011 | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 250.00 | | | 250.00 | |
| | | = | TOTAL AMOUNT | |
| | | | 500.00 | |

| | | | | |
|---|--|-----------------------------------|--|--|
| C. Full Name (Last, First, Middle Initial) Harmony Knutson | | Transaction ID : H4-169904 | Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address 212 Ellsworth Street | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City Alexandria State VA Zip Code 22314 | | | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Purpose of Disbursement: Consulting Fundraising | | Category/ Type | Allocated Activity or Event Year-To-Date 738263.97 | |
| Activity or Event Identifier: PSP11 | | | Date 12 / 15 / 2011 | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 1250.00 | | | 1250.00 | |
| | | = | TOTAL AMOUNT | |
| | | | 2500.00 | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1605.05 | | 1605.05 | | 3210.10 |

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) Andrea Pagano Reyes | | Transaction ID : H4-169905 | 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 PSC 557 Box 2377 | | | Allocated Activity or Event Year-To-Date 738434.57 | |
| City FPO | State AP | Zip Code 96379 | Date 12 / 15 / 2011 | |
| Purpose of Disbursement: Travel/Accommodation /Meals | | Category/ Type | Date 12 / 15 / 2011 | |
| Activity or Event Identifier: PSP11 | | | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | = TOTAL AMOUNT |
| 85.30 | | | 85.30 | 170.60 |

| | | | | |
|---|--------------------|-----------------------------------|--|----------------|
| B. Full Name (Last, First, Middle Initial) Michelle Ortiz | | Transaction ID : H4-169926 | 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 2801 Turk Blvd #306 | | | Allocated Activity or Event Year-To-Date 739765.69 | |
| City San Francisco | State CA | Zip Code 94118 | Date 12 / 15 / 2011 | |
| Purpose of Disbursement: Catering/Facilities | | Category/ Type | Date 12 / 15 / 2011 | |
| Activity or Event Identifier: PSP11 | | | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | = TOTAL AMOUNT |
| 665.56 | | | 665.56 | 1331.12 |

| | | | | |
|---|--------------------|-----------------------------------|--|----------------|
| C. Full Name (Last, First, Middle Initial) Michelle Ortiz | | Transaction ID : H4-169927 | 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 2801 Turk Blvd #306 | | | Allocated Activity or Event Year-To-Date 739832.69 | |
| City San Francisco | State CA | Zip Code 94118 | Date 12 / 15 / 2011 | |
| Purpose of Disbursement: Local Transportation | | Category/ Type | Date 12 / 15 / 2011 | |
| Activity or Event Identifier: PSP11 | | | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | = TOTAL AMOUNT |
| 33.50 | | | 33.50 | 67.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|----------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 784.36 | | 784.36 | | 1568.72 |

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 : H4-169928
Michelle Ortiz
Mailing Address 2801 Turk Blvd #306
City San Francisco State CA Zip Code 94118
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier: PSP11
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 741165.06
Date 12/15/2011
FEDERAL SHARE 666.18 + NONFEDERAL SHARE 666.19 = TOTAL AMOUNT 1332.37

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-169932
Production Solutions, Inc.
Mailing Address 1953 Gallows Road Suite 600
City Vienna State VA Zip Code 22182
Purpose of Disbursement: Deliveries
Activity or Event Identifier: PSP11
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 741271.11
Date 12/15/2011
FEDERAL SHARE 53.02 + NONFEDERAL SHARE 53.03 = TOTAL AMOUNT 106.05

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-169933
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: PSP11
Allocated Activity or Event: Fundraising
Allocated Activity or Event Year-To-Date 743102.59
Date 12/15/2011
FEDERAL SHARE 915.74 + NONFEDERAL SHARE 915.74 = TOTAL AMOUNT 1831.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 1634.94, 1634.96, 3269.90

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: Production Solutions, Inc. Transaction ID: H4-169934. Allocated Activity or Event: Fundraising. Purpose of Disbursement: Postage Credit. Activity or Event Identifier: PSP11. Date: 12/15/2011. Total Amount: -36.33.

Form B: Production Solutions, Inc. Transaction ID: H4-169935. Allocated Activity or Event: Fundraising. Purpose of Disbursement: Printing. Activity or Event Identifier: PSP11. Date: 12/15/2011. Total Amount: 420.50.

Form C: Production Solutions, Inc. Transaction ID: H4-169936. Allocated Activity or Event: Fundraising. Purpose of Disbursement: Postage. Activity or Event Identifier: PSP11. Date: 12/15/2011. Total Amount: 1417.80.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 900.99, 900.98, 1801.97.

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) Marissa Strickfaden Mailing Address 1100 First Street, SE #511 City Washington State DC Zip Code 20003 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: PSP11 | | Transaction ID : H4-169940 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: 744991.50 Date: 12 / 15 / 2011 | | |
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 43.47 | | 43.47 | | 86.94 |

| | | | | |
|---|---|--|---|--------------|
| B. Full Name (Last, First, Middle Initial) American Express Mailing Address Po Box 360001 City Ft. Lauderdale State FL Zip Code 33336-0001 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: PSP11 | | Transaction ID : H4-169951 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: 747181.30 Date: 12 / 15 / 2011 | | |
| See Attached Memo Entry | | | | |
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1094.90 | | 1094.90 | | 2189.80 |

| | | | | |
|---|---|--|---|--------------|
| C. Full Name (Last, First, Middle Initial) TRAVEL AGENCY SERVIC Mailing Address 3000 WILSON BLVD City LOS ANGELES State CA Zip Code 22201 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry | | Transaction ID : H4-169951-10000 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: 11 / 15 / 2011 | | |
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 20.00 | | 20.00 | | 40.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1138.37 | | 1138.37 | | 2276.74 |

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) US AIRWAYS, INC. Mailing Address 4000 E. SKY HARBOR BLVD. City LOS ANGELES State CA Zip Code 85034 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: | | Transaction ID : H4-169951-20000 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 11 / 15 / 2011 |
| [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 196.70 + 196.70 = 393.40 | | Category/Type Date 11 / 15 / 2011 |

| | | |
|---|--|--|
| B. Full Name (Last, First, Middle Initial) UNITED AIRLINES Mailing Address 1200 E ALGONQUIN RD City ELK GROVE State IL Zip Code 60007 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: | | Transaction ID : H4-169951-30000 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 11 / 23 / 2011 |
| [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 14.50 + 14.50 = 29.00 | | Category/Type Date 11 / 23 / 2011 |

| | | |
|---|--|--|
| C. Full Name (Last, First, Middle Initial) ALASKA AIRLINES INC. Mailing Address SEATTLE TACOMA AIRPORT City LOS ANGELES State CA Zip Code 98158 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: | | Transaction ID : H4-169951-40000 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 11 / 23 / 2011 |
| [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 104.85 + 104.85 = 209.70 | | Category/Type Date 11 / 23 / 2011 |

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 : H4-169951-50000 AMERICAN AIRLINES IN | | 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 AMERICAN AIRLINES-CCS | | Allocated Activity or Event Year-To-Date <input type="text"/> | |
| City State Zip Code LOS ANGELES CA 74133-1275 | Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 23 / 2011 | | |
| Purpose of Disbursement: Travel/Accommodation /Meals | <input type="text"/> Category/ Type | Allocated Activity or Event Year-To-Date <input type="text"/> | |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | | Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 23 / 2011 | |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | | |
| <input type="text"/> 74.85 | | <input type="text"/> 74.85 | |
| | | <input type="text"/> 149.70 | |

| | | | |
|---|---|--|--|
| B. Full Name (Last, First, Middle Initial) Transaction ID : H4-169951-60000 TRAVEL AGENCY SERVIC | | 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 3000 WILSON BLVD | | Allocated Activity or Event Year-To-Date <input type="text"/> | |
| City State Zip Code LOS ANGELES CA 22201 | Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 23 / 2011 | | |
| Purpose of Disbursement: Travel/Accommodation /Meals | <input type="text"/> Category/ Type | Allocated Activity or Event Year-To-Date <input type="text"/> | |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | | Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 23 / 2011 | |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | | |
| <input type="text"/> 20.00 | | <input type="text"/> 20.00 | |
| | | <input type="text"/> 40.00 | |

| | | | |
|--|---|--|--|
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4-169951-70000 UNITED AIRLINES | | 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 1200 E ALGONQUIN RD | | Allocated Activity or Event Year-To-Date <input type="text"/> | |
| City State Zip Code LOS ANGELES CA 60007 | Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 23 / 2011 | | |
| Purpose of Disbursement: Travel/Accommodation /Meals | <input type="text"/> Category/ Type | Allocated Activity or Event Year-To-Date <input type="text"/> | |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | | Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 23 / 2011 | |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | | |
| <input type="text"/> 405.80 | | <input type="text"/> 405.80 | |
| | | <input type="text"/> 811.60 | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------------------|---|---------------------------|---|---------------------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| <input type="text"/> 0.00 | | <input type="text"/> 0.00 | | <input type="text"/> 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) FRONTIER AIRLINES, I | | Transaction ID : H4-169951-80000 | | Allocated Activity or Event: | |
| Mailing Address 7001 TOWER RD | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City State Zip Code TULSA OK 80249-7312 | | | | <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 M M / D D / Y Y Y Y Y Y 11 23 2011 | |
| FEDERAL SHARE | | + NONFEDERAL SHARE | | = TOTAL AMOUNT | |
| 238.20 | | 238.20 | | 476.40 | |

| | | | | | |
|---|--|----------------------------------|--|---|--|
| B. Full Name (Last, First, Middle Initial) TRAVEL AGENCY SERVIC | | Transaction ID : H4-169951-90000 | | Allocated Activity or Event: | |
| Mailing Address 3000 WILSON BLVD | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City State Zip Code LOS ANGELES CA 22201 | | | | <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 M M / D D / Y Y Y Y Y Y 11 24 2011 | |
| FEDERAL SHARE | | + NONFEDERAL SHARE | | = TOTAL AMOUNT | |
| 20.00 | | 20.00 | | 40.00 | |

| | | | | | |
|---|--|----------------------------|--|---|--|
| C. Full Name (Last, First, Middle Initial) American Express | | Transaction ID : H4-169959 | | 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 Ft. Lauderdale FL 33336 | | | | <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: PSP11 | | Category/ Type | | Allocated Activity or Event Year-To-Date | |
| See Attached Memo Entry | | | | Date M M / D D / Y Y Y Y Y Y 12 15 2011 | |
| FEDERAL SHARE | | + NONFEDERAL SHARE | | = TOTAL AMOUNT | |
| 72.61 | | 72.62 | | 145.23 | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 72.61 | | 72.62 | | 145.23 |

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) W SAN DIEGO W SAN DI | | Transaction ID : H4-169959-10000 | | Allocated Activity or Event: | |
| Mailing Address 421 WEST B ST | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City State Zip Code SAN DIEGO CA 92101 | | | | <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 M M / D D / Y Y Y Y Y Y 11 / 23 / 2011 | |
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT | |
| 72.61 | | 72.62 | | 145.23 | |

| | | | | | |
|---|--|----------------------------|--|---|--|
| B. Full Name (Last, First, Middle Initial) American Express | | Transaction ID : H4-169970 | | 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: Catering/Facilities | | | | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Activity or Event Identifier: PSP11 | | Category/ Type | | Allocated Activity or Event Year-To-Date | |
| See Attached Memo Entry | | | | Date M M / D D / Y Y Y Y Y Y 12 / 15 / 2011 | |
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT | |
| 4670.83 | | 4670.83 | | 9341.66 | |

| | | | | | |
|--|--|----------------------------------|--|---|--|
| C. Full Name (Last, First, Middle Initial) LONG VIEW GALLERY | | Transaction ID : H4-169970-10000 | | Allocated Activity or Event: | |
| Mailing Address 1234 9 ST NW | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City State Zip Code WASHINGTON DC DC 20001 | | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| Purpose of Disbursement: Catering/Facilities | | | | <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 M M / D D / Y Y Y Y Y Y 11 / 01 / 2011 | |
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT | |
| 2250.00 | | 2250.00 | | 4500.00 | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 4670.83 | | 4670.83 | | 9341.66 |

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) MELBAS 125 Mailing Address 163 125TH ST City NEW YORK State NY Zip Code 10027 Purpose of Disbursement: Catering/Facilities Activity or Event Identifier: [MEMO ITEM] Memo Entry | | Transaction ID : H4-169970-20000 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 11 / 02 / 2011 Category/Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 297.19 + 297.19 = 594.38 |
|---|--|--|

| | | |
|---|--|--|
| B. Full Name (Last, First, Middle Initial) EAST BANK CLUB Mailing Address 500 N KINGSBURY ST City CHICAGO State IL Zip Code 60654-5721 Purpose of Disbursement: Catering/Facilities Activity or Event Identifier: [MEMO ITEM] Memo Entry | | Transaction ID : H4-169970-30000 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 11 / 05 / 2011 Category/Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 280.24 + 280.24 = 560.48 |
|---|--|--|

| | | |
|--|--|--|
| C. Full Name (Last, First, Middle Initial) CORNER BAKERY Mailing Address 1425 K ST NW City WASHINGTON State DC Zip Code 20005 Purpose of Disbursement: Catering/Facilities Activity or Event Identifier: [MEMO ITEM] Memo Entry | | Transaction ID : H4-169970-40000 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 11 / 17 / 2011 Category/Type FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 114.50 + 114.50 = 229.00 |
|--|--|--|

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) CORNER BAKERY | | Transaction ID : H4-169970-50000 | | Allocated Activity or Event: | |
| Mailing Address 1425 K ST NW | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City WASHINGTON State DC Zip Code 20005 | | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| Purpose of Disbursement: Catering/Facilities | | | | <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 11 / 17 / 2011 | |
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT | |
| 134.40 | | 134.40 | | 268.80 | |

| | | | | | |
|--|--|----------------------------------|--|---|--|
| B. Full Name (Last, First, Middle Initial) CORNER BAKERY | | Transaction ID : H4-169970-60000 | | Allocated Activity or Event: | |
| Mailing Address 1425 K ST NW | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City WASHINGTON State DC Zip Code 20005 | | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| Purpose of Disbursement: Catering/Facilities | | | | <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 11 / 18 / 2011 | |
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT | |
| 114.50 | | 114.50 | | 229.00 | |

| | | | | | |
|---|--|----------------------------------|--|---|--|
| C. Full Name (Last, First, Middle Initial) WELL DUNN CATERING I | | Transaction ID : H4-169970-70000 | | Allocated Activity or Event: | |
| Mailing Address 513 MORSE ST NE | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City WASHINGTON State DC Zip Code 20002-7011 | | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| Purpose of Disbursement: Catering/Facilities | | | | <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 11 / 18 / 2011 | |
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT | |
| 1130.00 | | 1130.00 | | 2260.00 | |

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 : H4-169970-80000 WATERFRONT RESTAURAN | | 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 THE EMBRCDR PIER 9 101 ST | | Allocated Activity or Event Year-To-Date <input type="text"/> | |
| City State Zip Code SAN FRANCISCO CA 94111 | <input type="text"/> Category/ Type | Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 24 / 2011 | |
| Purpose of Disbursement: Catering/Facilities | | <input type="text"/> | |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | | <input type="text"/> | |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | <input type="text"/> | |
| <input type="text"/> 350.00 | | <input type="text"/> 700.00 | |
| <input type="text"/> 350.00 | | <input type="text"/> 350.00 | |

| | | | |
|---|---|--|--|
| B. Full Name (Last, First, Middle Initial) Transaction ID : H4-169971 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 <input type="text"/> | |
| City State Zip Code Fort Lauderdale FL 33336 | <input type="text"/> Category/ Type | Date <input type="text"/> / <input type="text"/> / <input type="text"/> 12 / 15 / 2011 | |
| Purpose of Disbursement: Office Supplies Expenses | | <input type="text"/> 757233.40 | |
| Activity or Event Identifier: PSP11 | | <input type="text"/> | |
| See Attached Memo Entry | | <input type="text"/> | |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | <input type="text"/> | |
| <input type="text"/> 282.60 | | <input type="text"/> 565.21 | |
| <input type="text"/> 282.61 | | <input type="text"/> 282.61 | |

| | | | |
|---|---|--|--|
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4-169971-10000 TLF*HARMON'S & BARTO | | 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 3737 NW 34TH STREET | | Allocated Activity or Event Year-To-Date <input type="text"/> | |
| City State Zip Code PORTLAND ME 73112 | <input type="text"/> Category/ Type | Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 10 / 2011 | |
| Purpose of Disbursement: Office Supplies Expenses | | <input type="text"/> | |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | | <input type="text"/> | |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | <input type="text"/> | |
| <input type="text"/> 57.23 | | <input type="text"/> 114.45 | |
| <input type="text"/> 57.22 | | <input type="text"/> 57.22 | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|-----------------------------|---|-----------------------------|---|-----------------------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| <input type="text"/> 282.60 | | <input type="text"/> 282.61 | | <input type="text"/> 565.21 |

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) AMEX GIFT CARD SALT Transaction ID : H4-169971-20000 | | 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 | |
| Mailing Address ATTN PHIL MORRILL GP | | Allocated Activity or Event Year-To-Date <input type="text"/> | |
| City SALT LAKE CITY | State UT | Zip Code 84184 | Date <input type="text"/> 11 / <input type="text"/> 10 / <input type="text"/> 2011 |
| Purpose of Disbursement: Office Supplies Expenses | | Category/ Type <input type="text"/> | Allocated Activity or Event Year-To-Date <input type="text"/> |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE |
| <input type="text"/> 111.93 | | | <input type="text"/> 111.92 |
| | | = | TOTAL AMOUNT <input type="text"/> 223.85 |

| | | | |
|---|--------------------|--|---|
| B. Full Name (Last, First, Middle Initial) CVS PHARMACY 6069 06 Transaction ID : H4-169971-30000 | | 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 | |
| Mailing Address 1101 CONNECTICUT AVE NW | | Allocated Activity or Event Year-To-Date <input type="text"/> | |
| City WASHINGTON | State DC | Zip Code 20036 | Date <input type="text"/> 11 / <input type="text"/> 11 / <input type="text"/> 2011 |
| Purpose of Disbursement: Office Supplies Expenses | | Category/ Type <input type="text"/> | Allocated Activity or Event Year-To-Date <input type="text"/> |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE |
| <input type="text"/> 8.18 | | | <input type="text"/> 8.18 |
| | | = | TOTAL AMOUNT <input type="text"/> 16.36 |

| | | | |
|---|--------------------|--|---|
| C. Full Name (Last, First, Middle Initial) CVS PHARMACY 6069 06 Transaction ID : H4-169971-40000 | | 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 1101 CONNECTICUT AVE NW | | Allocated Activity or Event Year-To-Date <input type="text"/> | |
| City WASHINGTON | State DC | Zip Code 20036 | Date <input type="text"/> 11 / <input type="text"/> 11 / <input type="text"/> 2011 |
| Purpose of Disbursement: Office Supplies Expenses | | Category/ Type <input type="text"/> | Allocated Activity or Event Year-To-Date <input type="text"/> |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE |
| <input type="text"/> 32.22 | | | <input type="text"/> 32.21 |
| | | = | TOTAL AMOUNT <input type="text"/> 64.43 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------------------|---|---------------------------|---|---------------------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| <input type="text"/> 0.00 | | <input type="text"/> 0.00 | | <input type="text"/> 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 : H4-169971-50000 STAPLES 01532 Mailing Address 1901 L ST NW | | 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 State Zip Code WASHINGTON DC 20036-3506 | Purpose of Disbursement: Office Supplies Expenses | Allocated Activity or Event Year-To-Date _____ Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | Category/ Type | |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | |
| <input type="text" value="49.57"/> + <input type="text" value="49.56"/> = <input type="text" value="99.13"/> | | |

| | | |
|--|--|--|
| B. Full Name (Last, First, Middle Initial) Transaction ID : H4-169971-60000 CVS PHARMACY 6069 06 Mailing Address 1101 CONNECTICUT AVE NW | | 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 State Zip Code WASHINGTON DC 20036 | Purpose of Disbursement: Office Supplies Expenses | Allocated Activity or Event Year-To-Date _____ Date <input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2011"/> |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | Category/ Type | |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | |
| <input type="text" value="23.47"/> + <input type="text" value="23.52"/> = <input type="text" value="46.99"/> | | |

| | | |
|--|---|--|
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4-169972 American Express Mailing Address PO Box 360001 | | 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 State Zip Code Fort Lauderdale FL 33336 | Purpose of Disbursement: Travel/Accommodation /Meals | Allocated Activity or Event Year-To-Date <input type="text" value="763363.89"/> |
| Activity or Event Identifier: PSP11 | Category/ Type | Date <input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2011"/> |
| See Attached Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | |
| <input type="text" value="3065.24"/> + <input type="text" value="3065.25"/> = <input type="text" value="6130.49"/> | | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|--------------------------------------|---|--------------------------------------|---|--------------------------------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| <input type="text" value="3065.24"/> | | <input type="text" value="3065.25"/> | | <input type="text" value="6130.49"/> |

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 : H4-169972-10000 Renaissance9671NMAYF Mailing Address 1127 CONNECTICUT AVE NW | | 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 State Zip Code WASHINGTON DC 20036-4301 | Purpose of Disbursement: Travel/Accommodation /Meals | Allocated Activity or Event Year-To-Date <input type="text"/> |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | Category/ Type | Date <input type="text"/> 11 / <input type="text"/> 03 / <input type="text"/> 2011 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | |
| <input type="text"/> 30.50 <input type="text"/> 30.50 <input type="text"/> 61.00 | | |

| | | |
|---|---|--|
| B. Full Name (Last, First, Middle Initial) Transaction ID : H4-169972-20000 US AIRWAYS, INC. Mailing Address 4000 E. SKY HARBOR BLVD. | | 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 State Zip Code ATLANTA GA 85034 | Purpose of Disbursement: Travel/Accommodation /Meals | Allocated Activity or Event Year-To-Date <input type="text"/> |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | Category/ Type | Date <input type="text"/> 11 / <input type="text"/> 07 / <input type="text"/> 2011 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | |
| <input type="text"/> 220.90 <input type="text"/> 220.90 <input type="text"/> 441.80 | | |

| | | |
|--|---|--|
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4-169972-30000 ENSO ASIAN BISTRO & Mailing Address 210 E TRADE 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 State Zip Code CHARLOTTE NC 28202-2420 | Purpose of Disbursement: Travel/Accommodation /Meals | Allocated Activity or Event Year-To-Date <input type="text"/> |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | Category/ Type | Date <input type="text"/> 11 / <input type="text"/> 07 / <input type="text"/> 2011 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | |
| <input type="text"/> 88.46 <input type="text"/> 88.45 <input type="text"/> 176.91 | | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------------------|---|---------------------------|---|---------------------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| <input type="text"/> 0.00 | | <input type="text"/> 0.00 | | <input type="text"/> 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) MERT'S HEART AND S 5 | | Transaction ID : H4-169972-40000 | | Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address 214 N COLLEGE ST | | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City CHARLOTTE State NC Zip Code 28202-2112 | | | | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Purpose of Disbursement: Travel/Accommodation /Meals | | Category/Type | | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: | | | | Date 11 / 07 / 2011 | |
| [MEMO ITEM] Memo Entry | | | | | |
| FEDERAL SHARE | | + NONFEDERAL SHARE | | = TOTAL AMOUNT | |
| 16.59 | | 16.59 | | 33.18 | |

| | | | | | |
|---|--|----------------------------------|--|---|--|
| B. Full Name (Last, First, Middle Initial) VTS-DECDA INC. VTS | | Transaction ID : H4-169972-50000 | | Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address VTS-DECDA INC. | | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City DALLAS State TX Zip Code 75204 | | | | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Purpose of Disbursement: Travel/Accommodation /Meals | | Category/Type | | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: | | | | Date 11 / 07 / 2011 | |
| [MEMO ITEM] Memo Entry | | | | | |
| FEDERAL SHARE | | + NONFEDERAL SHARE | | = TOTAL AMOUNT | |
| 15.63 | | 15.62 | | 31.25 | |

| | | | | | |
|---|--|----------------------------------|--|---|--|
| C. Full Name (Last, First, Middle Initial) PMI BWI AIRPORT PARK | | Transaction ID : H4-169972-60000 | | Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address 7000 ELM ROAD | | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City BWI AIRPORT State MD Zip Code 21240 | | | | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Purpose of Disbursement: Travel/Accommodation /Meals | | Category/Type | | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: | | | | Date 11 / 08 / 2011 | |
| [MEMO ITEM] Memo Entry | | | | | |
| FEDERAL SHARE | | + NONFEDERAL SHARE | | = TOTAL AMOUNT | |
| 22.00 | | 22.00 | | 44.00 | |

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) Halcyon 371658 Mailing Address 500 S TRYON ST STE 201 City Charlotte State NC Zip Code 28202 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry | | Transaction ID : H4-169972-70000 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 11 / 08 / 2011 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 27.82 + 27.81 = 55.63 | | Category/Type |

| | | |
|--|--|--|
| B. Full Name (Last, First, Middle Initial) STARBUCKS MAIN201539 Mailing Address # 13 City CHARLOTTE State NC Zip Code 28208 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry | | Transaction ID : H4-169972-80000 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 11 / 08 / 2011 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 5.55 + 5.54 = 11.09 | | Category/Type |

| | | |
|--|--|--|
| C. Full Name (Last, First, Middle Initial) The Ritz Carlton Cha Mailing Address 214 N TRYON ST STE 1600 City CHARLOTTE State NC Zip Code 28202-2364 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry | | Transaction ID : H4-169972-90000 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 11 / 08 / 2011 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 30.44 + 30.44 = 60.88 | | Category/Type |

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) The Ritz Carlton Cha Mailing Address 214 N TRYON ST STE 1600 City CHARLOTTE State NC Zip Code 28202-2364 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 83.57 83.56 167.13 | | Transaction ID : H4-169972-100000 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 11 / 08 / 2011 |
|---|--|---|

| | | |
|--|--|---|
| B. Full Name (Last, First, Middle Initial) US AIRWAYS Mailing Address 4000 E SKY HARBOR BLVD City CHARLOTTE State NC Zip Code 85034 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 25.00 25.00 50.00 | | Transaction ID : H4-169972-110000 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 11 / 08 / 2011 |
|--|--|---|

| | | |
|--|--|---|
| C. Full Name (Last, First, Middle Initial) US AIRWAYS Mailing Address 4000 E SKY HARBOR BLVD City CHARLOTTE State NC Zip Code 85034 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 25.00 25.00 50.00 | | Transaction ID : H4-169972-120000 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 11 / 08 / 2011 |
|--|--|---|

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) SOUNDPATH 8610000072 | | Transaction ID : H4-169972-130000 | | Allocated Activity or Event: | |
| Mailing Address SUITE 1000 | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City ATLANTA State GA Zip Code 30305 | | | | <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 11 / 10 / 2011 | |
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT | |
| 696.38 | | 696.37 | | 1392.75 | |

| | | | | | |
|---|--|-----------------------------------|--|---|--|
| B. Full Name (Last, First, Middle Initial) PANERA BREAD #601420 | | Transaction ID : H4-169972-140000 | | Allocated Activity or Event: | |
| Mailing Address 1350 CONNECTICUT AVE | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City WASHINGTON State DC Zip Code 20036 | | | | <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 11 / 11 / 2011 | |
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT | |
| 100.06 | | 100.05 | | 200.11 | |

| | | | | | |
|---|--|-----------------------------------|--|---|--|
| C. Full Name (Last, First, Middle Initial) Southwest Airlines (| | Transaction ID : H4-169972-150000 | | Allocated Activity or Event: | |
| Mailing Address PO BOX 36611 | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City DALLAS State TX Zip Code 75235 | | | | <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 11 / 17 / 2011 | |
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT | |
| 243.85 | | 243.85 | | 487.70 | |

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) Karl Aleph Karl Alep | | Transaction ID : H4-169972-160000 | | Allocated Activity or Event: | |
| Mailing Address 901 MISSION ST #104 | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City State Zip Code New York NY 94103 | | | | <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 M M / D D / Y Y Y Y Y Y 11 / 17 / 2011 | |
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT | |
| 250.00 | | 250.00 | | 500.00 | |

| | | | | | |
|---|--|-----------------------------------|--|---|--|
| B. Full Name (Last, First, Middle Initial) BEACON BAR & GRILL 0 | | Transaction ID : H4-169972-170000 | | Allocated Activity or Event: | |
| Mailing Address 1615 RHODE ISLAND AVE NW | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City State Zip Code WASHINGTON DC 20036 | | | | <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 M M / D D / Y Y Y Y Y Y 11 / 17 / 2011 | |
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT | |
| 20.40 | | 20.40 | | 40.80 | |

| | | | | | |
|---|--|-----------------------------------|--|---|--|
| C. Full Name (Last, First, Middle Initial) BEACON BAR & GRILL 0 | | Transaction ID : H4-169972-180000 | | Allocated Activity or Event: | |
| Mailing Address 1615 RHODE ISLAND AVE NW | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City State Zip Code WASHINGTON DC 20036 | | | | <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 M M / D D / Y Y Y Y Y Y 11 / 17 / 2011 | |
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT | |
| 153.70 | | 153.70 | | 307.40 | |

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) NOOSHI 0056 | | Transaction ID : H4-169972-190000 | | Allocated Activity or Event: | |
| Mailing Address 1120 19TH ST NW FRNT 2 | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City WASHINGTON State DC Zip Code 20036-3686 | | | | <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 11 / 18 / 2011 | |
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT | |
| 256.75 | | 256.75 | | 513.50 | |

| | | | | | |
|---|--|-----------------------------------|--|---|--|
| B. Full Name (Last, First, Middle Initial) STARBUCKS CORP007252 | | Transaction ID : H4-169972-200000 | | Allocated Activity or Event: | |
| Mailing Address 1301 CONNECTICUT AVE NW | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City WASHINGTON State DC Zip Code 20036-1815 | | | | <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 11 / 18 / 2011 | |
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT | |
| 18.43 | | 18.42 | | 36.85 | |

| | | | | | |
|---|--|-----------------------------------|--|---|--|
| C. Full Name (Last, First, Middle Initial) STARBUCKS CORP072686 | | Transaction ID : H4-169972-210000 | | Allocated Activity or Event: | |
| Mailing Address 1 FEDERAL ST | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City BOSTON State MA Zip Code 02110-2012 | | | | <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 11 / 19 / 2011 | |
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT | |
| 5.03 | | 5.03 | | 10.06 | |

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) BOS TAXI MED 0327 09 | | Transaction ID : H4-169972-220000 | | Allocated Activity or Event: | |
| Mailing Address 4250 24TH ST | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City State Zip Code LONG ISLAND C NY 11101-4608 | | | | <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 M M / D D / Y Y Y Y Y Y 11 19 2011 | |
| FEDERAL SHARE | | + NONFEDERAL SHARE | | = TOTAL AMOUNT | |
| 14.45 | | 14.45 | | 28.90 | |

| | | | | | |
|---|--|-----------------------------------|--|---|--|
| B. Full Name (Last, First, Middle Initial) Renaissance9671NMAYF | | Transaction ID : H4-169972-230000 | | Allocated Activity or Event: | |
| Mailing Address 1127 CONNECTICUT AVE NW | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City State Zip Code WASHINGTON DC 20036-4301 | | | | <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 M M / D D / Y Y Y Y Y Y 11 22 2011 | |
| FEDERAL SHARE | | + NONFEDERAL SHARE | | = TOTAL AMOUNT | |
| 50.08 | | 50.07 | | 100.15 | |

| | | | | | |
|---|--|-----------------------------------|--|---|--|
| C. Full Name (Last, First, Middle Initial) Southwest Airlines (| | Transaction ID : H4-169972-240000 | | Allocated Activity or Event: | |
| Mailing Address PO BOX 36611 | | | | <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| City State Zip Code DALLAS TX 75235 | | | | <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 M M / D D / Y Y Y Y Y Y 11 23 2011 | |
| FEDERAL SHARE | | + NONFEDERAL SHARE | | = TOTAL AMOUNT | |
| 114.70 | | 114.70 | | 229.40 | |

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) AFFNIA MANHATTAN 220 Mailing Address 371 7TH AVE City NEW YORK State NY Zip Code 10001 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry | | Transaction ID : H4-169972-250000 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 11 / 25 / 2011 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 549.95 + 550.05 = 1100.00 | | Category/Type Date |

| | | |
|---|--|--|
| B. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001 City Fort Lauderdale State FL Zip Code 33336 Purpose of Disbursement: Office Supplies Expenses Activity or Event Identifier: PSP11 See Attached Memo Entry | | Transaction ID : H4-169982 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 12 / 15 / 2011 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 2.71 + 2.72 = 5.43 | | Category/Type Date |

| | | |
|---|--|--|
| C. Full Name (Last, First, Middle Initial) STAPLES 00953 Mailing Address 59 UNION SQ W City NEW YORK State NY Zip Code 10003-3202 Purpose of Disbursement: Office Supplies Expenses Activity or Event Identifier: [MEMO ITEM] Memo Entry | | Transaction ID : H4-169982-10000 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 11 / 09 / 2011 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 2.71 + 2.72 = 5.43 | | Category/Type Date |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 2.71 | | 2.72 | | 5.43 |

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 | | Transaction ID : H4-169983 | 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 763391.50 | |
| City Fort Lauderdale | State FL | Zip Code 33336 | Date 12 / 15 / 2011 | |
| Purpose of Disbursement: Publication & Dues | | Category/ Type | Date 12 / 15 / 2011 | |
| Activity or Event Identifier: PSP11 | | | Date 12 / 15 / 2011 | |
| See Attached Memo Entry | | | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | = TOTAL AMOUNT |
| 11.09 | | | 11.09 | 22.18 |

| | | | | |
|---|--------------------|---|--|----------------|
| B. Full Name (Last, First, Middle Initial) NEW YORK TIMES | | Transaction ID : H4-169983-10000 | 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 | |
| Mailing Address 620 EIGHTH AVENUE | | | Allocated Activity or Event Year-To-Date | |
| City NEW YORK | State NY | Zip Code 10018 | Date 11 / 21 / 2011 | |
| Purpose of Disbursement: Publication & Dues | | Category/ Type | Date 11 / 21 / 2011 | |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | | | Date 11 / 21 / 2011 | |
| See Attached Memo Entry | | | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | = TOTAL AMOUNT |
| 11.09 | | | 11.09 | 22.18 |

| | | | | |
|---|--------------------|-----------------------------------|--|----------------|
| C. Full Name (Last, First, Middle Initial) American Express | | Transaction ID : H4-169984 | 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 763852.23 | |
| City Fort Lauderdale | State FL | Zip Code 33336 | Date 12 / 15 / 2011 | |
| Purpose of Disbursement: Travel/Accommodation /Meals | | Category/ Type | Date 12 / 15 / 2011 | |
| Activity or Event Identifier: PSP11 | | | Date 12 / 15 / 2011 | |
| See Attached Memo Entry | | | | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | = TOTAL AMOUNT |
| 230.36 | | | 230.37 | 460.73 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|---------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 241.45 | | 241.46 | | 482.91 |

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) METRO-NORTH TVM Mailing Address 347 MADISON AVE City New York State NY Zip Code 10017-3706 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 7.13 7.12 14.25 | | Transaction ID : H4-169984-10000 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 11 / 15 / 2011 Category/ Type |
|--|--|--|

| | | |
|--|--|--|
| B. Full Name (Last, First, Middle Initial) NYC TAXI MED SBV127 Mailing Address 75 CANAL ST W City BRONX State NY Zip Code 10451-6417 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 3.48 3.48 6.96 | | Transaction ID : H4-169984-20000 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 11 / 08 / 2011 Category/ Type |
|--|--|--|

| | | |
|---|--|--|
| C. Full Name (Last, First, Middle Initial) GRAMERCY PARK FLOWER Mailing Address 236 3RD AVE City NEW YORK State NY Zip Code 10003 Purpose of Disbursement: Travel/Accommodation /Meals Activity or Event Identifier: [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 58.25 58.25 116.50 | | Transaction ID : H4-169984-30000 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 11 / 10 / 2011 Category/ Type |
|---|--|--|

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 : H4-169984-40000
STARBUCKS CORP073783
Mailing Address 10 UNION SQ E
City NEW YORK State NY Zip Code 10003-3314
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 3.21 NONFEDERAL SHARE 3.21 TOTAL AMOUNT 6.42

B. Full Name (Last, First, Middle Initial) Transaction ID : H4-169984-50000
BAR-CODE
Mailing Address 1101 17TH ST. N.W.
City WASHINGTON State DC Zip Code 20036
Purpose of Disbursement: Travel/Accommodation /Meals
Activity or Event Identifier:
[MEMO ITEM] Memo Entry
FEDERAL SHARE 158.29 NONFEDERAL SHARE 158.31 TOTAL AMOUNT 316.60

C. Full Name (Last, First, Middle Initial) Transaction ID : H4-169985
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: PSP11
See Attached Memo Entry
FEDERAL SHARE 639.98 NONFEDERAL SHARE 639.98 TOTAL AMOUNT 1279.96

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Table with 3 columns: FEDERAL SHARE, NONFEDERAL SHARE, TOTAL AMOUNT. Values: 639.98, 639.98, 1279.96

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) GIANT FOOD INC #261 | | Transaction ID : H4-169985-10000 | | Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address 3131 DUKE ST | | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City State Zip Code ALEXANDRIA VA 22314-4518 | | | | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Purpose of Disbursement: Travel/Accommodation /Meals | | Category/ Type | | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: | | | | Date M M / D D / Y Y Y Y Y Y 11 17 2011 | |
| [MEMO ITEM] Memo Entry | | | | | |
| FEDERAL SHARE | | + NONFEDERAL SHARE | | = TOTAL AMOUNT | |
| 37.25 | | 37.24 | | 74.49 | |

| | | | | | |
|---|--|----------------------------------|--|---|--|
| B. Full Name (Last, First, Middle Initial) VTS PHILADELPHIA VER | | Transaction ID : H4-169985-20000 | | Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address 700 PACKER AVE | | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City State Zip Code PHILADELPHIA PA 19148 | | | | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Purpose of Disbursement: Travel/Accommodation /Meals | | Category/ Type | | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: | | | | Date M M / D D / Y Y Y Y Y Y 11 22 2011 | |
| [MEMO ITEM] Memo Entry | | | | | |
| FEDERAL SHARE | | + NONFEDERAL SHARE | | = TOTAL AMOUNT | |
| 3.08 | | 3.07 | | 6.15 | |

| | | | | | |
|---|--|----------------------------------|--|---|--|
| C. Full Name (Last, First, Middle Initial) VTS PHILADELPHIA VER | | Transaction ID : H4-169985-30000 | | Allocated Activity or Event: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt | |
| Mailing Address 700 PACKER AVE | | | | <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support | |
| City State Zip Code PHILADELPHIA PA 19148 | | | | <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Purpose of Disbursement: Travel/Accommodation /Meals | | Category/ Type | | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: | | | | Date M M / D D / Y Y Y Y Y Y 11 22 2011 | |
| [MEMO ITEM] Memo Entry | | | | | |
| FEDERAL SHARE | | + NONFEDERAL SHARE | | = TOTAL AMOUNT | |
| 4.31 | | 4.30 | | 8.61 | |

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 : H4-169985-40000 UNITED AIRLINES Mailing Address 1200 E ALGONQUIN RD | | 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 State Zip Code ROSEMONT I 60007 | Allocated Activity or Event Year-To-Date <input type="text"/> | | | | | | | | | | |
| Purpose of Disbursement: Travel/Accommodation /Meals | <input type="text"/> Category/Type | Date <input type="text"/> 11 / <input type="text"/> 07 / <input type="text"/> 2011 | | | | | | | | | |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | | <table border="0"> <tr> <td>FEDERAL SHARE</td> <td>+</td> <td>NONFEDERAL SHARE</td> <td>=</td> <td>TOTAL AMOUNT</td> </tr> <tr> <td><input type="text"/> 439.70</td> <td></td> <td><input type="text"/> 439.70</td> <td></td> <td><input type="text"/> 879.40</td> </tr> </table> | FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT | <input type="text"/> 439.70 | | <input type="text"/> 439.70 | |
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT | | | | | | | |
| <input type="text"/> 439.70 | | <input type="text"/> 439.70 | | <input type="text"/> 879.40 | | | | | | | |

| | | | | | | | | | | | |
|--|--|--|---------------|----------------------------|------------------|---|--------------|----------------------------|--|----------------------------|--|
| B. Full Name (Last, First, Middle Initial) Transaction ID : H4-169985-50000 UNION STATION PARKIN Mailing Address 30 MASSACHUSETTS AVE NE | | 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 State Zip Code WASHINGTON DC 20002-4225 | Allocated Activity or Event Year-To-Date <input type="text"/> | | | | | | | | | | |
| Purpose of Disbursement: Travel/Accommodation /Meals | <input type="text"/> Category/Type | Date <input type="text"/> 11 / <input type="text"/> 22 / <input type="text"/> 2011 | | | | | | | | | |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | | <table border="0"> <tr> <td>FEDERAL SHARE</td> <td>+</td> <td>NONFEDERAL SHARE</td> <td>=</td> <td>TOTAL AMOUNT</td> </tr> <tr> <td><input type="text"/> 11.00</td> <td></td> <td><input type="text"/> 11.00</td> <td></td> <td><input type="text"/> 22.00</td> </tr> </table> | FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT | <input type="text"/> 11.00 | | <input type="text"/> 11.00 | |
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT | | | | | | | |
| <input type="text"/> 11.00 | | <input type="text"/> 11.00 | | <input type="text"/> 22.00 | | | | | | | |

| | | | | | | | | | | | |
|--|--|--|---------------|-----------------------------|------------------|---|--------------|-----------------------------|--|-----------------------------|--|
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4-169985-60000 AMTRAK Mailing Address 60 MASSACHUSETTS AVE NE | | 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 State Zip Code WASHINGTON DC 20002 | Allocated Activity or Event Year-To-Date <input type="text"/> | | | | | | | | | | |
| Purpose of Disbursement: Travel/Accommodation /Meals | <input type="text"/> Category/Type | Date <input type="text"/> 11 / <input type="text"/> 21 / <input type="text"/> 2011 | | | | | | | | | |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | | <table border="0"> <tr> <td>FEDERAL SHARE</td> <td>+</td> <td>NONFEDERAL SHARE</td> <td>=</td> <td>TOTAL AMOUNT</td> </tr> <tr> <td><input type="text"/> 113.00</td> <td></td> <td><input type="text"/> 113.00</td> <td></td> <td><input type="text"/> 226.00</td> </tr> </table> | FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT | <input type="text"/> 113.00 | | <input type="text"/> 113.00 | |
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT | | | | | | | |
| <input type="text"/> 113.00 | | <input type="text"/> 113.00 | | <input type="text"/> 226.00 | | | | | | | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------------------|---|---------------------------|---|---------------------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| <input type="text"/> 0.00 | | <input type="text"/> 0.00 | | <input type="text"/> 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 : H4-169985-70000 BEACON HOTEL & CORP Mailing Address 1615 RHODE ISLAND AVE NW | | 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 State Zip Code WASHINGTON DC 20036-3205 | | Allocated Activity or Event Year-To-Date <input type="text"/> |
| Purpose of Disbursement: Travel/Accommodation /Meals | <input type="text"/> | Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 18 / 2011 |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | Category/ Type | |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | |
| <input type="text"/> 5.31 <input type="text"/> 5.31 <input type="text"/> 10.62 | | |

| | | |
|--|----------------------|--|
| B. Full Name (Last, First, Middle Initial) Transaction ID : H4-169985-80000 STARBUCKS CORP007252 Mailing Address 1301 CONNECTICUT AVE NW | | 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 State Zip Code WASHINGTON DC 20036-1815 | | Allocated Activity or Event Year-To-Date <input type="text"/> |
| Purpose of Disbursement: Travel/Accommodation /Meals | <input type="text"/> | Date <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 17 / 2011 |
| Activity or Event Identifier: [MEMO ITEM] Memo Entry | Category/ Type | |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | |
| <input type="text"/> 26.33 <input type="text"/> 26.36 <input type="text"/> 52.69 | | |

| | | |
|--|----------------------|--|
| C. Full Name (Last, First, Middle Initial) Transaction ID : H4-169986 American Express Mailing Address PO Box 360001 | | 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 State Zip Code Ft Lauderdale FL 33336-0001 | | Allocated Activity or Event Year-To-Date <input type="text"/> 765171.28 |
| Purpose of Disbursement: Deliveries | <input type="text"/> | Date <input type="text"/> / <input type="text"/> / <input type="text"/> 12 / 15 / 2011 |
| Activity or Event Identifier: PSP11 See Attached Memo Entry | Category/ Type | |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT | | |
| <input type="text"/> 19.54 <input type="text"/> 19.55 <input type="text"/> 39.09 | | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|----------------------------|---|----------------------------|---|----------------------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| <input type="text"/> 19.54 | | <input type="text"/> 19.55 | | <input type="text"/> 39.09 |

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) FDX#730454815059403 Mailing Address 3875 AIRWAYS BLVD City MEMPHIS State TN Zip Code 38116 Purpose of Disbursement: Deliveries Activity or Event Identifier: | | Transaction ID : H4-169986-10000 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 11 / 11 / 2011 |
| [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 7.48 + 7.47 = 14.95 | | Category/Type Date 11 / 11 / 2011 |

| | | |
|---|--|--|
| B. Full Name (Last, First, Middle Initial) FEDEX# 077036214910 Mailing Address 3875 AIRWAYS BLVD FL H3 City MEMPHIS State TN Zip Code 38116-5070 Purpose of Disbursement: Deliveries Activity or Event Identifier: | | Transaction ID : H4-169986-20000 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 11 / 11 / 2011 |
| [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 12.06 + 12.08 = 24.14 | | Category/Type Date 11 / 11 / 2011 |

| | | |
|---|--|--|
| C. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001 City Fort Lauderdale State FL Zip Code 33336 Purpose of Disbursement: Office Supplies Expenses Activity or Event Identifier: PSP11 | | Transaction ID : H4-169987 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 12 / 15 / 2011 |
| See Attached Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 27.00 + 27.00 = 54.00 | | Category/Type Date 12 / 15 / 2011 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 27.00 | | 27.00 | | 54.00 |

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) STAPLES INC. 00682 Mailing Address 500 STAPLES DR City CHAMBERSBURG State PA Zip Code 01702 Purpose of Disbursement: Office Supplies Expenses Activity or Event Identifier: | | Transaction ID : H4-169987-10000 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 11 / 12 / 2011 |
| [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 17.16 + 17.16 = 34.32 | | Category/Type Date 11 / 12 / 2011 |

| | | |
|---|--|--|
| B. Full Name (Last, First, Middle Initial) STAPLES 01532 Mailing Address 1901 L ST NW City WASHINGTON State DC Zip Code 20036-3506 Purpose of Disbursement: Office Supplies Expenses Activity or Event Identifier: | | Transaction ID : H4-169987-20000 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 11 / 12 / 2011 |
| [MEMO ITEM] Memo Entry FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 9.84 + 9.84 = 19.68 | | Category/Type Date 11 / 12 / 2011 |

| | | |
|---|--|--|
| C. Full Name (Last, First, Middle Initial) Cornucopia, Inc. Mailing Address 7510 Hamilton Spring Road City Bethesda State MD Zip Code 20817 Purpose of Disbursement: Catering/Facilities Activity or Event Identifier: PSP11 | | Transaction ID : H4-170357 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 12 / 21 / 2011 |
| FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 1101.25 + 1101.26 = 2202.51 | | Category/Type Date 12 / 21 / 2011 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1101.25 | | 1101.26 | | 2202.51 |

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) United Parcel Service | | Transaction ID : H4-170375 | 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 | | | | |
| City Philadelphia | State PA | Zip Code 19170-0001 | | |
| Purpose of Disbursement: Deliveries | | Category/ Type | Allocated Activity or Event Year-To-Date 767489.35 | |
| Activity or Event Identifier: PSP11 | | | Date 12 / 21 / 2011 | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| 30.78 | | | 30.78 | |
| | | = | TOTAL AMOUNT | |
| | | | 61.56 | |

| | | | | |
|--|-------|-------------------|---|--|
| B. 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 | | | | |
| City | State | Zip Code | | |
| Purpose of Disbursement: | | Category/ Type | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: | | | Date | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| | | | | |
| | | = | TOTAL AMOUNT | |
| | | | | |

| | | | | |
|--|-------|-------------------|---|--|
| 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 | | | | |
| City | State | Zip Code | | |
| Purpose of Disbursement: | | Category/ Type | Allocated Activity or Event Year-To-Date | |
| Activity or Event Identifier: | | | Date | |
| FEDERAL SHARE | | + | NONFEDERAL SHARE | |
| | | | | |
| | | = | TOTAL AMOUNT | |
| | | | | |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 30.78 | | 30.78 | | 61.56 |

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 |
| 50264.57 | 50264.71 | 100529.28 |