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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full) — USE FEC MAILING LABEL OR TYPE OR PRINT ▼ — Example: If typing, type over the lines. 12FE4M5

PRO CHOICE VOTER

ADDRESS (number and street) ▼ 300 MARTINE AVENUE #4-K

☐ Check if different than previously reported. (ADD)

WHITE PLAINS — CITY ▲ — NY — STATE ▲ — 10601 — ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼ C00202804

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

(c) 12-Day PRE-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on ___ / ___ / ___ in the State of ___

(d) 30-Day POST-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on ___ / ___ / ___ in the State of ___

5. Covering Period 04 / 01 / 2002 through 06 / 30 / 2002

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Elizabeth Shollenberger

Signature of Treasurer Elizabeth Shollenberger Date 07 / 15 / 2002

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

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FEC FORM 3X (Revised 1/01)

FECAN042

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SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Revised 1/01)

Write or Type Committee Name

PRO-CHOICE VOTER

Report Covering the Period: From: 04 01 2002 To: 06 30 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2002		1,410.66
(b) Cash on Hand at Beginning of Reporting Period	134.097	
(c) Total Receipts (from Line 19)	0	0
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	134.097	1,410.66
7. Total Disbursements (from Line 30)	25.000	319.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	109.097	1,090.91
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	23,955.66	

☐ 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

FE2/N042

22037654602

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Revised 1/01)

Write or Type Committee Name
PRO CHOICE VOTER

Report Covering the Period: From: 04 01 2002 To: 06 30 2002

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)	0	
(ii) Unitemized	0	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4) ▶	0	0
12. Transfers From Affiliated/Other Party Committees	0	0
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0
18. Transfers from Nonfederal Account for Joint Activity	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ▶	0	0
20. Total Federal Receipts (subtract Line 18 from Line 19) ▶	0	0

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/01)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	
(ii) Non-Federal Share	0	
(b) Other Federal Operating Expenditures	0	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	0	
22. Transfers to Affiliated/Other Party Committees	0	
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	
24. Independent Expenditures (use Schedule E)	0	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)	0	
26. Loan Repayments Made	0	
27. Loans Made	0	
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	
(b) Political Party Committees	0	
(c) Other Political Committees (such as PACs)	0	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0	
29. Other Disbursements	350.00	419.75
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) ▶	350.00	419.75
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	350.00	419.75

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	0	0
33. Total Contribution Refunds (from Line 28(d))	0	0
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	0	0
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0	0
36. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29

PAGE 1 OF 1

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)
PRO CHOICE VOTER

A.
Full Name (Last, First, Middle Initial)
Reliance Bank

Mailing Address
1200 Mamaroneck Ave

City: White Plains State: NY Zip Code: 10601

Purpose of Disbursement
bank fees for account

Category/Type: 001

Candidate Name
NONE

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 06 / 30 / 2002

Amount of Each Disbursement this Period: 47.16

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

Mailing Address
300 Mamaroneck Ave. #4K

City: White Plains State: NY Zip Code: 10601

Purpose of Disbursement
XEROXING, POSTAGE, OFFICE SUPPLIES

Category/Type: 001

Candidate Name
NONE

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 06 / 30 / 2002

Amount of Each Disbursement this Period: 202.84

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: / /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

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

FEC Schedule B (Form 3X) (Revised 1/01)

FEWN042

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SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE OF

FOR LINE NUMBER: (check only one) ☐ 9 ☒ 10

NAME OF COMMITTEE (In Full)
PRO CHOICE VOTER

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Westchester Coalition for Legal Abortion

Nature of Debt (Purpose): previously disclosed

Mailing Address 237 Mamaroneck Avenue

City White Plains State NY Zip Code 10605

Outstanding Balance Beginning This Period: 23,955.66

Amount Incurred This Period: 0

Payment This Period: 0

Outstanding Balance at Close of This Period: 23,955.66

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

2) **TOTALS** This Period (last page this line number only) ▶

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶

4) **ADD** 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

FEC Schedule D (Form 3X) (Revised 1/01)

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
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☐	Received from the Senate Office of Public Records	Date of Receipt
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☐	Electronic Filing	

PAO — PREPARER

7/17/02 — DATE PREPARED

(6/2000)