

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

WOMENCOUNT PAC

ADDRESS (number and street)

393 7TH AVENUE, SUITE 301

Check if different
than previously
reported. (ACC)

SAN FRANCISCO

CA

94118

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00450098

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly
Report
Due On:

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

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
09 01 2016

through

M M M / D D D / Y Y Y Y Y Y
09 30 2016

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

Mason, Stacy, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Mason, Stacy, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 20 2016

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

WOMENCOUNT PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
09 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		3658.53
(b) Cash on Hand at Beginning of Reporting Period.....	12733.75	
(c) Total Receipts (from Line 19)	33972.57	227993.74
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	46706.32	231652.27
7. Total Disbursements (from Line 31).....	36785.02	221730.97
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	9921.30	9921.30
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	4462.45	

☒ 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. 05/2016)

Page 3

Write or Type Committee Name

WOMENCOUNT PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	6

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).....	31626.42	218341.76
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	31626.42	218341.76
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	1346.15	8103.68
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	32972.57	226445.44
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1000.00	1548.30
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	33972.57	227993.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	33972.57	227993.74

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1922.02	17689.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1922.02	17689.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	33652.50	202224.57
24. Independent Expenditures (use Schedule E)	62.50	168.75
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	1000.00	1500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	148.00	148.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	1148.00	1648.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	36785.02	221730.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	36785.02	221730.97

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	32972.57	226445.44
34. Total Contribution Refunds (from Line 28(d))	1148.00	1648.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31824.57	224797.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1922.02	17689.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	1922.02	17689.65

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

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

FOR LINE NUMBER: PAGE 6 OF 531

(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)

WOMENCOUNT PAC

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

A. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : INCA6765

Amount of Each Receipt this Period

200.00

☐ Memo Item

ERMK: FRIENDS OF ANNA THRONE-HOLST

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

B. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : INCA6760

Amount of Each Receipt this Period

200.00

☐ Memo Item

ERMK: CARROLL FOR COLORADO

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

C. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : INCA6761

Amount of Each Receipt this Period

200.00

☐ Memo Item

ERMK: CAIN FOR CONGRESS

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 7 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : INCA6762

Amount of Each Receipt this Period

200.00

☐ Memo Item

ERMK: CAROL SHEA-PORTER FOR CONGRESS

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

B. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : INCA6763

Amount of Each Receipt this Period

200.00

☐ Memo Item

ERMK: MONICA VERNON FOR CONGRESS

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

C. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : INCA6764

Amount of Each Receipt this Period

200.00

☐ Memo Item

ERMK: COLLEEN DEACON FOR CONGRESS

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 8 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. COXE, SIMONE, , ,

Mailing Address 1401 EMERSON STREET

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

NONPROFIT MEDIA 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
09 / 01 / 2016

Transaction ID : INCA6766

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

B. GEOGHEGAN, DOROTHY, , ,

Mailing Address 472 FAIR OAKS STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SAN FRANCISCO UNIFIED SCHOOL DISTRICT

Occupation (for Individual)

TEACHER

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
09 / 01 / 2016

Transaction ID : INCA6759

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

C. PEARL, AMY, , ,

Mailing Address 555 S EL MONTE AVENUE

City

LOS ALTOS

State

CA

Zip Code

94022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ACORN FINANCIAL PLANNING

Occupation (for Individual)

REGISTERED INVESTMENT ADVISOR

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : INCA6774

Amount of Each Receipt this Period

500.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

2500.00

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

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

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

FOR LINE NUMBER: PAGE 9 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. WAPNIR, IRENE, , ,

Mailing Address 773 FRENCHMANS RD

City
STANFORD

State
CA

Zip Code
94305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STANFORD

Occupation (for Individual)
SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : INCA6767

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: CARROLL FOR COLORADO

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

B. WAPNIR, IRENE, , ,

Mailing Address 773 FRENCHMANS RD

City
STANFORD

State
CA

Zip Code
94305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STANFORD

Occupation (for Individual)
SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : INCA6768

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: CAIN FOR CONGRESS

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

C. WAPNIR, IRENE, , ,

Mailing Address 773 FRENCHMANS RD

City
STANFORD

State
CA

Zip Code
94305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STANFORD

Occupation (for Individual)
SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : INCA6770

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: MONICA VERNON FOR CONGRESS

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

30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 531
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. WAPNIR, IRENE, , ,

Mailing Address 773 FRENCHMANS RD

City
STANFORDState
CAZip Code
94305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STANFORDOccupation (for Individual)
SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
09	01	2016

Transaction ID : INCA6771

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: COLLEEN DEACON FOR CONGRESS

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

B. WAPNIR, IRENE, , ,

Mailing Address 773 FRENCHMANS RD

City
STANFORDState
CAZip Code
94305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STANFORDOccupation (for Individual)
SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
09	01	2016

Transaction ID : INCA6769

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: CAROL SHEA-PORTER FOR CONGRESS

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

C. WAPNIR, IRENE, , ,

Mailing Address 773 FRENCHMANS RD

City
STANFORDState
CAZip Code
94305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STANFORDOccupation (for Individual)
SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
09	01	2016

Transaction ID : INCA6773

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

30.00

TOTAL This Period (last page this line number 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 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. WAPNIR, IRENE, , ,

Mailing Address 773 FRENCHMANS RD

City
STANFORD

State
CA

Zip Code
94305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STANFORD

Occupation (for Individual)
SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 01 / 2016

Transaction ID : INCA6772

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: FRIENDS OF ANNA THRONE-HOLST

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

B. WILSON, HEATHER, , ,

Mailing Address 337 S. FREMONT ST., APT. 410

City
SAN MATEO

State
CA

Zip Code
94401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ABERNATHY MACGREGOR GROUP

Occupation (for Individual)
PR EXECUTIVE

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
09 / 02 / 2016

Transaction ID : INCA6757

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

C. WILSON, JENNIFER, , ,

Mailing Address PO BOX 10195, DEPT 194

City
PALO ALTO

State
CA

Zip Code
94303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2016

Transaction ID : INCA6758

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

2010.00

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

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

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

FOR LINE NUMBER: PAGE 12 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. ADDY, MARCIA, , ,

Mailing Address 3425 NE 67TH AVE

City
PORTLAND

State
OR

Zip Code
97213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BEAVERTON SCHOOL DISTRICT

Occupation (for Individual)
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

105.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2016

Transaction ID : INCA6750

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: CAROL SHEA-PORTER FOR CONGRESS

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

B. ADDY, MARCIA, , ,

Mailing Address 3425 NE 67TH AVE

City
PORTLAND

State
OR

Zip Code
97213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BEAVERTON SCHOOL DISTRICT

Occupation (for Individual)
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

105.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2016

Transaction ID : INCA6749

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: CAIN FOR CONGRESS

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

C. ADDY, MARCIA, , ,

Mailing Address 3425 NE 67TH AVE

City
PORTLAND

State
OR

Zip Code
97213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BEAVERTON SCHOOL DISTRICT

Occupation (for Individual)
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

105.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 03 / 2016

Transaction ID : INCA6748

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: CARROLL FOR COLORADO

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

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

15.00

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

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

FOR LINE NUMBER: PAGE 13 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. ADDY, MARCIA, , ,

Mailing Address 3425 NE 67TH AVE

City
PORTLAND

State
OR

Zip Code
97213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BEAVERTON SCHOOL DISTRICT

Occupation (for Individual)
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

105.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2016

Transaction ID : INCA6751

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MONICA VERNON FOR CONGRESS

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

B. ADDY, MARCIA, , ,

Mailing Address 3425 NE 67TH AVE

City
PORTLAND

State
OR

Zip Code
97213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BEAVERTON SCHOOL DISTRICT

Occupation (for Individual)
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

105.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2016

Transaction ID : INCA6753

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: FRIENDS OF ANNA THRONE-HOLST

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

C. ADDY, MARCIA, , ,

Mailing Address 3425 NE 67TH AVE

City
PORTLAND

State
OR

Zip Code
97213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BEAVERTON SCHOOL DISTRICT

Occupation (for Individual)
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

105.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2016

Transaction ID : INCA6752

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: COLLEEN DEACON FOR CONGRESS

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

15.00

TOTAL This Period (last page this line number 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 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. GASKILL, FLORENCE, , ,

Mailing Address 13 EARLSWOOD AVENUE

City
PITTSBURGH

State
PA

Zip Code
15228-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15.00

Date of Receipt

09 / 03 / 2016

Transaction ID : INCA6754

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

Mailing Address 13 EARLSWOOD AVENUE

City
PITTSBURGH

State
PA

Zip Code
15228-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15.00

Date of Receipt

09 / 03 / 2016

Transaction ID : INCA6755

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

Mailing Address 13 EARLSWOOD AVENUE

City
PITTSBURGH

State
PA

Zip Code
15228-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

15.00

Date of Receipt

09 / 03 / 2016

Transaction ID : INCA6756

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

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

15.00

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

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

FOR LINE NUMBER: PAGE 15 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. FELDMAN, MIMI, , ,

Mailing Address 510 N ALTA DR.

City
BEVERLY HILLS

State
CA

Zip Code
90210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2016

Transaction ID : INCA6747

Amount of Each Receipt this Period

100.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. FELDMAN, MIMI, , ,

Mailing Address 510 N ALTA DR.

City
BEVERLY HILLS

State
CA

Zip Code
90210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2016

Transaction ID : INCA6746

Amount of Each Receipt this Period

100.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

C. ACKER-LYONS, ALEXANDRA, , ,

Mailing Address 3349 WAVERLEY STREET

City
PALO ALTO

State
CA

Zip Code
94306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ELECTING WOMEN SILICON VALLEY

Occupation (for Individual)
POLITICAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6744

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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 16 OF 531

(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)

WOMENCOUNT PAC

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

A. APEL, JACQUELINE, , ,

Mailing Address 14605 CARROLTON ROAD

City
ROCKVILLEState
MDZip Code
20853FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

REAL ESTATE ASSISTANT/ WEBSITE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

Transaction ID : INCA6711

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

B. APEL, JACQUELINE, , ,

Mailing Address 14605 CARROLTON ROAD

City
ROCKVILLEState
MDZip Code
20853FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

REAL ESTATE ASSISTANT/ WEBSITE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

Transaction ID : INCA6713

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

C. APEL, JACQUELINE, , ,

Mailing Address 14605 CARROLTON ROAD

City
ROCKVILLEState
MDZip Code
20853FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

REAL ESTATE ASSISTANT/ WEBSITE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

Transaction ID : INCA6712

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

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

15.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 17 OF 531
(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)
WOMENCOUNT PACFull Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. APEL, JACQUELINE, , ,

Mailing Address 14605 CARROLTON ROAD

City
ROCKVILLEState
MDZip Code
20853FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
REAL ESTATE ASSISTANT/ WEBSITE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2016

Transaction ID : INCA6714

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

Mailing Address 20052 SUNSET DRIVE

City
SARATOGAState
CAZip Code
95070FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
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
09	/	07	/	2016

Transaction ID : INCA6745

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

Mailing Address 20052 SUNSET DRIVE

City
SARATOGAState
CAZip Code
95070FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
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
09	/	07	/	2016

Transaction ID : INCA6743

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

2005.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. DEL POZO, JILLIAN, , ,

Mailing Address 559 NATHAN ABBOTT WAY

City
STANFORD

State
CA

Zip Code
94305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STANFORD UNIVERSITY SCHOOL OF LAW

Occupation (for Individual)
DIR OF FACILITIES AND OPERATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6731

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

B. DEL POZO, JILLIAN, , ,

Mailing Address 559 NATHAN ABBOTT WAY

City
STANFORD

State
CA

Zip Code
94305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STANFORD UNIVERSITY SCHOOL OF LAW

Occupation (for Individual)
DIR OF FACILITIES AND OPERATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6732

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

C. DEL POZO, JILLIAN, , ,

Mailing Address 559 NATHAN ABBOTT WAY

City
STANFORD

State
CA

Zip Code
94305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STANFORD UNIVERSITY SCHOOL OF LAW

Occupation (for Individual)
DIR OF FACILITIES AND OPERATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6733

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

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

30.00

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

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

FOR LINE NUMBER: PAGE 19 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. DEL POZO, JILLIAN, , ,

Mailing Address 559 NATHAN ABBOTT WAY

City
STANFORD

State
CA

Zip Code
94305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STANFORD UNIVERSITY SCHOOL OF LAW

Occupation (for Individual)
DIR OF FACILITIES AND OPERATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6722

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

B. DEL POZO, JILLIAN, , ,

Mailing Address 559 NATHAN ABBOTT WAY

City
STANFORD

State
CA

Zip Code
94305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STANFORD UNIVERSITY SCHOOL OF LAW

Occupation (for Individual)
DIR OF FACILITIES AND OPERATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6735

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

C. DEL POZO, JILLIAN, , ,

Mailing Address 559 NATHAN ABBOTT WAY

City
STANFORD

State
CA

Zip Code
94305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STANFORD UNIVERSITY SCHOOL OF LAW

Occupation (for Individual)
DIR OF FACILITIES AND OPERATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6723

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

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

35.00

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 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. DEL POZO, JILLIAN, , ,

Mailing Address 559 NATHAN ABBOTT WAY

City
STANFORD

State
CA

Zip Code
94305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STANFORD UNIVERSITY SCHOOL OF LAW

Occupation (for Individual)
DIR OF FACILITIES AND OPERATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6734

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

B. DOLAN, JUDITH, , ,

Mailing Address 13182 SHALIMAR PLACE

City
DEL MAR

State
CA

Zip Code
92014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNIVERSITY DO CA SAN DIEGO

Occupation (for Individual)
DESIGN PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6704

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

C. DOLAN, JUDITH, , ,

Mailing Address 13182 SHALIMAR PLACE

City
DEL MAR

State
CA

Zip Code
92014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNIVERSITY DO CA SAN DIEGO

Occupation (for Individual)
DESIGN PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6705

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

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

30.00

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

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

FOR LINE NUMBER: PAGE 21 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. DOLAN, JUDITH, , ,

Mailing Address 13182 SHALIMAR PLACE

City
DEL MAR

State
CA

Zip Code
92014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNIVERSITY DO CA SAN DIEGO

Occupation (for Individual)
DESIGN PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6706

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

B. DOLAN, JUDITH, , ,

Mailing Address 13182 SHALIMAR PLACE

City
DEL MAR

State
CA

Zip Code
92014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNIVERSITY DO CA SAN DIEGO

Occupation (for Individual)
DESIGN PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6710

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. DOLAN, JUDITH, , ,

Mailing Address 13182 SHALIMAR PLACE

City
DEL MAR

State
CA

Zip Code
92014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNIVERSITY DO CA SAN DIEGO

Occupation (for Individual)
DESIGN PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6709

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

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

30.00

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

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

FOR LINE NUMBER: PAGE 22 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. DOLAN, JUDITH, , ,

Mailing Address 13182 SHALIMAR PLACE

City
DEL MAR

State
CA

Zip Code
92014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNIVERSITY DO CA SAN DIEGO

Occupation (for Individual)
DESIGN PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6708

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

B. DOLAN, JUDITH, , ,

Mailing Address 13182 SHALIMAR PLACE

City
DEL MAR

State
CA

Zip Code
92014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNIVERSITY DO CA SAN DIEGO

Occupation (for Individual)
DESIGN PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6707

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

C. DOLAN, JUDITH, , ,

Mailing Address 13182 SHALIMAR PLACE

City
DEL MAR

State
CA

Zip Code
92014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNIVERSITY DO CA SAN DIEGO

Occupation (for Individual)
DESIGN PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6703

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

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

30.00

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

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

FOR LINE NUMBER: PAGE 23 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. HENDREN, ANNE, , ,

Mailing Address 2655 SW RAVENSVIEW DRIVE

City
PORTLANDState
ORZip Code
97201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6727

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

B. HENDREN, ANNE, , ,

Mailing Address 2655 SW RAVENSVIEW DRIVE

City
PORTLANDState
ORZip Code
97201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6730

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

C. HENDREN, ANNE, , ,

Mailing Address 2655 SW RAVENSVIEW DRIVE

City
PORTLANDState
ORZip Code
97201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6726

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

15.00

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

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

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

FOR LINE NUMBER: PAGE 24 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. HENDREN, ANNE, , ,

Mailing Address 2655 SW RAVENSVIEW DRIVE

City
PORTLANDState
ORZip Code
97201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6725

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. HENDREN, ANNE, , ,

Mailing Address 2655 SW RAVENSVIEW DRIVE

City
PORTLANDState
ORZip Code
97201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6724

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

C. HENDREN, ANNE, , ,

Mailing Address 2655 SW RAVENSVIEW DRIVE

City
PORTLANDState
ORZip Code
97201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6728

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

15.00

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

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

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

FOR LINE NUMBER: PAGE 25 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. HENDREN, ANNE, , ,

Mailing Address 2655 SW RAVENVIEW DRIVE

City
PORTLANDState
ORZip Code
97201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6729

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

B. SHULMAN, NORMA, , ,

Mailing Address 13 ALFRED RD

City
FRAMINGHAMState
MAZip Code
1701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6739

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

C. SHULMAN, NORMA, , ,

Mailing Address 13 ALFRED RD

City
FRAMINGHAMState
MAZip Code
1701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6740

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

15.00

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

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

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

FOR LINE NUMBER: PAGE 26 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. SHULMAN, NORMA, , ,

Mailing Address 13 ALFRED RD

City
FRAMINGHAM

State
MA

Zip Code
1701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6741

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

B. SHULMAN, NORMA, , ,

Mailing Address 13 ALFRED RD

City
FRAMINGHAM

State
MA

Zip Code
1701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6738

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

C. SHULMAN, NORMA, , ,

Mailing Address 13 ALFRED RD

City
FRAMINGHAM

State
MA

Zip Code
1701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6736

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

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

15.00

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 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. SHULMAN, NORMA, , ,

Mailing Address 13 ALFRED RD

City
FRAMINGHAM

State
MA

Zip Code
1701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6737

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. TAYLOR, MAIDA, , ,

Mailing Address 785 FOERSTER ST

City
SAN FRANCISCO

State
CA

Zip Code
94127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6715

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

C. TAYLOR, MAIDA, , ,

Mailing Address 785 FOERSTER ST

City
SAN FRANCISCO

State
CA

Zip Code
94127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6719

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

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

25.00

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

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

FOR LINE NUMBER: PAGE 28 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. TAYLOR, MAIDA, , ,

Mailing Address 785 FOERSTER ST

City
SAN FRANCISCO

State
CA

Zip Code
94127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6718

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

B. TAYLOR, MAIDA, , ,

Mailing Address 785 FOERSTER ST

City
SAN FRANCISCO

State
CA

Zip Code
94127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6717

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

C. TAYLOR, MAIDA, , ,

Mailing Address 785 FOERSTER ST

City
SAN FRANCISCO

State
CA

Zip Code
94127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6720

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

30.00

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

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

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

FOR LINE NUMBER: PAGE 29 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. TAYLOR, MAIDA, , ,

Mailing Address 785 FOERSTER ST

City
SAN FRANCISCO

State
CA

Zip Code
94127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6721

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

B. TAYLOR, MAIDA, , ,

Mailing Address 785 FOERSTER ST

City
SAN FRANCISCO

State
CA

Zip Code
94127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 07 / 2016

Transaction ID : INCA6716

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

C. ZACK, DIANE, , ,

Mailing Address 40 ROCK RD

City
KENTFIELD

State
CA

Zip Code
94904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
COMMUNITY VOLUNTEER ACTIVIST

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
09 / 07 / 2016

Transaction ID : INCA6742

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

1020.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 30 OF 531
(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)
WOMENCOUNT PACFull Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ARRINGTON, PH.D., JULIA, , ,

Mailing Address 3070 VICHY AVE.

City
NAPAState
CAZip Code
94558FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.57

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
09	08	2016

Transaction ID : INCA6678

Amount of Each Receipt this Period

28.57

☐ Memo Item

ERMK: MAGGIE FOR NH

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ARRINGTON, PH.D., JULIA, , ,

Mailing Address 3070 VICHY AVE.

City
NAPAState
CAZip Code
94558FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.57

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
09	08	2016

Transaction ID : INCA6677

Amount of Each Receipt this Period

28.57

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ARRINGTON, PH.D., JULIA, , ,

Mailing Address 3070 VICHY AVE.

City
NAPAState
CAZip Code
94558FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

228.57

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
09	08	2016

Transaction ID : INCA6676

Amount of Each Receipt this Period

28.57

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

85.71

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

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

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

FOR LINE NUMBER: PAGE 31 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. ARRINGTON, PH.D., JULIA, , ,

Mailing Address 3070 VICHY AVE.

City
NAPAState
CAZip Code
94558FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6675

Amount of Each Receipt this Period

28.57

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

B. ARRINGTON, PH.D., JULIA, , ,

Mailing Address 3070 VICHY AVE.

City
NAPAState
CAZip Code
94558FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6679

Amount of Each Receipt this Period

28.58

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

C. ARRINGTON, PH.D., JULIA, , ,

Mailing Address 3070 VICHY AVE.

City
NAPAState
CAZip Code
94558FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

228.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6674

Amount of Each Receipt this Period

28.57

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

85.72

TOTAL This Period (last page this line number 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 531
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

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

A. ARRINGTON, PH.D., JULIA, , ,

Mailing Address 3070 VICHY AVE.

City
NAPA

State
CA

Zip Code
94558

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.57

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6673

Amount of Each Receipt this Period

28.57

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

B. ARRINGTON, PH.D., JULIA, , ,

Mailing Address 3070 VICHY AVE.

City
NAPA

State
CA

Zip Code
94558

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.57

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6680

Amount of Each Receipt this Period

28.57

☐ Memo Item

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

C. BARFOD, BIERTA, , ,

Mailing Address 8600 35TH AVE NE

City
SEATTLE

State
WA

Zip Code
98115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KATSUTA HOSPITAL

Occupation (for Individual)
MEDICAL EDITOR

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
09 / 08 / 2016

Transaction ID : INCA6692

Amount of Each Receipt this Period

87.50

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

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

144.64

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

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

FOR LINE NUMBER: PAGE 33 OF 531

(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)

WOMENCOUNT PAC

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

A. BARFOD, BIERTA, , ,

Mailing Address 8600 35TH AVE NE

City
SEATTLEState
WAZip Code
98115FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KATSUTA HOSPITALOccupation (for Individual)
MEDICAL EDITOR

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
09 / 08 / 2016

Transaction ID : INCA6694

Amount of Each Receipt this Period

87.50

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

B. BARFOD, BIERTA, , ,

Mailing Address 8600 35TH AVE NE

City
SEATTLEState
WAZip Code
98115FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KATSUTA HOSPITALOccupation (for Individual)
MEDICAL EDITOR

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
09 / 08 / 2016

Transaction ID : INCA6695

Amount of Each Receipt this Period

87.50

☐ Memo Item

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

C. BARFOD, BIERTA, , ,

Mailing Address 8600 35TH AVE NE

City
SEATTLEState
WAZip Code
98115FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KATSUTA HOSPITALOccupation (for Individual)
MEDICAL EDITOR

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
09 / 08 / 2016

Transaction ID : INCA6693

Amount of Each Receipt this Period

87.50

☐ Memo Item

ERMK: MAGGIE FOR NH

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

262.50

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 34 OF 531

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. BARFOD, BIERTA, , ,

Mailing Address 8600 35TH AVE NE

City
SEATTLE

State
WA

Zip Code
98115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KATSUTA HOSPITAL

Occupation (for Individual)
MEDICAL EDITOR

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
09 / 08 / 2016

Transaction ID : INCA6688

Amount of Each Receipt this Period

87.50

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

B. BARFOD, BIERTA, , ,

Mailing Address 8600 35TH AVE NE

City
SEATTLE

State
WA

Zip Code
98115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KATSUTA HOSPITAL

Occupation (for Individual)
MEDICAL EDITOR

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
09 / 08 / 2016

Transaction ID : INCA6689

Amount of Each Receipt this Period

87.50

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

C. BARFOD, BIERTA, , ,

Mailing Address 8600 35TH AVE NE

City
SEATTLE

State
WA

Zip Code
98115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KATSUTA HOSPITAL

Occupation (for Individual)
MEDICAL EDITOR

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
09 / 08 / 2016

Transaction ID : INCA6690

Amount of Each Receipt this Period

87.50

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

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

262.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 35 OF 531
(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)

WOMENCOUNT PAC

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

A. BARFOD, BIERTA, , ,

Mailing Address 8600 35TH AVE NE

City
SEATTLEState
WAZip Code
98115FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KATSUTA HOSPITALOccupation (for Individual)
MEDICAL EDITOR

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
09		08		2016

Transaction ID : INCA6691

Amount of Each Receipt this Period

87.50

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

B. KENNY, MAUREEN, , ,

Mailing Address 2511 SW 21ST STREET

City
FORT LAUDERDALEState
FLZip Code
33312FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
MANAGEMENT CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : INCA6681

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

C. KENNY, MAUREEN, , ,

Mailing Address 2511 SW 21ST STREET

City
FORT LAUDERDALEState
FLZip Code
33312FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
MANAGEMENT CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : INCA6682

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

97.50

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 36 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. KENNY, MAUREEN, , ,

Mailing Address 2511 SW 21ST STREET

City

FORT LAUDERDALE

State

FL

Zip Code

33312

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

MANAGEMENT CONSULTANT

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016

Transaction ID : INCA6683

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

B. KENNY, MAUREEN, , ,

Mailing Address 2511 SW 21ST STREET

City

FORT LAUDERDALE

State

FL

Zip Code

33312

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

MANAGEMENT CONSULTANT

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016

Transaction ID : INCA6684

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

C. KENNY, MAUREEN, , ,

Mailing Address 2511 SW 21ST STREET

City

FORT LAUDERDALE

State

FL

Zip Code

33312

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

MANAGEMENT CONSULTANT

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2016

Transaction ID : INCA6686

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

15.00

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. KENNY, MAUREEN, , ,

Mailing Address 2511 SW 21ST STREET

City

FORT LAUDERDALE

State

FL

Zip Code

33312

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

MANAGEMENT CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6687

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

B. KENNY, MAUREEN, , ,

Mailing Address 2511 SW 21ST STREET

City

FORT LAUDERDALE

State

FL

Zip Code

33312

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

MANAGEMENT CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6685

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

C. MASON, STACY, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

WOMENCOUNT

Occupation (for Individual)

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10835.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6696

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

20.00

TOTAL This Period (last page this line number 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 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. MASON, STACY, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

WOMENCOUNT

Occupation (for Individual)

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

10835.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6701

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

B. MASON, STACY, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

WOMENCOUNT

Occupation (for Individual)

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

10835.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6700

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

C. MASON, STACY, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

WOMENCOUNT

Occupation (for Individual)

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

10835.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6702

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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: PAGE 39 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. MASON, STACY, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

WOMENCOUNT

Occupation (for Individual)

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10835.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6698

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

B. MASON, STACY, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

WOMENCOUNT

Occupation (for Individual)

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10835.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6697

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

C. MASON, STACY, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

WOMENCOUNT

Occupation (for Individual)

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10835.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6699

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

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

30.00

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

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

FOR LINE NUMBER: PAGE 40 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. MURRAY, REBECCA, , ,

Mailing Address 36311 PIZARRO DRIVE

City
FREMONTState
CAZip Code
94536FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

JONES DAY

Occupation (for Individual)

HR COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6661

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

B. MURRAY, REBECCA, , ,

Mailing Address 36311 PIZARRO DRIVE

City
FREMONTState
CAZip Code
94536FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

JONES DAY

Occupation (for Individual)

HR COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6660

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

C. MURRAY, REBECCA, , ,

Mailing Address 36311 PIZARRO DRIVE

City
FREMONTState
CAZip Code
94536FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

JONES DAY

Occupation (for Individual)

HR COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

45.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6659

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

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

15.00

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

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

FOR LINE NUMBER: PAGE 41 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. MURRAY, REBECCA, , ,

Mailing Address 36311 PIZARRO DRIVE

City
FREMONT

State
CA

Zip Code
94536

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JONES DAY

Occupation (for Individual)
HR COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6658

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

B. MURRAY, REBECCA, , ,

Mailing Address 36311 PIZARRO DRIVE

City
FREMONT

State
CA

Zip Code
94536

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JONES DAY

Occupation (for Individual)
HR COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6664

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

C. MURRAY, REBECCA, , ,

Mailing Address 36311 PIZARRO DRIVE

City
FREMONT

State
CA

Zip Code
94536

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JONES DAY

Occupation (for Individual)
HR COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

45.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6665

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

20.00

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

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

FOR LINE NUMBER: PAGE 42 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. MURRAY, REBECCA, , ,

Mailing Address 36311 PIZARRO DRIVE

City
FREMONT

State
CA

Zip Code
94536

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JONES DAY

Occupation (for Individual)
HR COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6662

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

B. MURRAY, REBECCA, , ,

Mailing Address 36311 PIZARRO DRIVE

City
FREMONT

State
CA

Zip Code
94536

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
JONES DAY

Occupation (for Individual)
HR COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6663

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

C. SELIN, CRIS, , ,

Mailing Address 6767 FRANK LLOYD WRIGHT AVE UNIT 2

City
MIDDLETON

State
WI

Zip Code
53562

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6666

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

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

15.00

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

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

FOR LINE NUMBER: PAGE 43 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. SELIN, CRIS, , ,

Mailing Address 6767 FRANK LLOYD WRIGHT AVE UNIT 2

City
MIDDLETON

State
WI

Zip Code
53562

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6672

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

B. SELIN, CRIS, , ,

Mailing Address 6767 FRANK LLOYD WRIGHT AVE UNIT 2

City
MIDDLETON

State
WI

Zip Code
53562

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6670

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

C. SELIN, CRIS, , ,

Mailing Address 6767 FRANK LLOYD WRIGHT AVE UNIT 2

City
MIDDLETON

State
WI

Zip Code
53562

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6671

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

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

15.00

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

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

FOR LINE NUMBER: PAGE 44 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. SELIN, CRIS, , ,

Mailing Address 6767 FRANK LLOYD WRIGHT AVE UNIT 2

City
MIDDLETONState
WIZip Code
53562FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6668

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

B. SELIN, CRIS, , ,

Mailing Address 6767 FRANK LLOYD WRIGHT AVE UNIT 2

City
MIDDLETONState
WIZip Code
53562FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6669

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

C. SELIN, CRIS, , ,

Mailing Address 6767 FRANK LLOYD WRIGHT AVE UNIT 2

City
MIDDLETONState
WIZip Code
53562FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA6667

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

15.00

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

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

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

FOR LINE NUMBER: PAGE 45 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. WOODS, LAURE, , ,

Mailing Address 1240 WESTRIDGE DRIVE

City
PORTOLA VALLEY

State
CA

Zip Code
94028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 10 / 2016

Transaction ID : INCA6657

Amount of Each Receipt this Period

2700.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

B. HANSON, BEVERLY, , ,

Mailing Address 5115 BIRDWOOD

City
HOUSTON

State
TX

Zip Code
77096

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
H.I.S.D.

Occupation (for Individual)
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 11 / 2016

Transaction ID : INCA6650

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

C. HANSON, BEVERLY, , ,

Mailing Address 5115 BIRDWOOD

City
HOUSTON

State
TX

Zip Code
77096

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
H.I.S.D.

Occupation (for Individual)
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 11 / 2016

Transaction ID : INCA6649

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

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

2720.00

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

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

FOR LINE NUMBER: PAGE 46 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. HANSON, BEVERLY, , ,

Mailing Address 5115 BIRDWOOD

City
HOUSTON

State
TX

Zip Code
77096

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

H.I.S.D.

Occupation (for Individual)

TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2016

Transaction ID : INCA6651

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

B. HANSON, BEVERLY, , ,

Mailing Address 5115 BIRDWOOD

City
HOUSTON

State
TX

Zip Code
77096

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

H.I.S.D.

Occupation (for Individual)

TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2016

Transaction ID : INCA6654

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

C. HANSON, BEVERLY, , ,

Mailing Address 5115 BIRDWOOD

City
HOUSTON

State
TX

Zip Code
77096

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

H.I.S.D.

Occupation (for Individual)

TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2016

Transaction ID : INCA6653

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

30.00

TOTAL This Period (last page this line number 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 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. HANSON, BEVERLY, , ,

Mailing Address 5115 BIRDWOOD

City
HOUSTON

State
TX

Zip Code
77096

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

H.I.S.D.

Occupation (for Individual)

TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2016

Transaction ID : INCA6652

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

B. HANSON, BEVERLY, , ,

Mailing Address 5115 BIRDWOOD

City
HOUSTON

State
TX

Zip Code
77096

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

H.I.S.D.

Occupation (for Individual)

TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2016

Transaction ID : INCA6656

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. HANSON, BEVERLY, , ,

Mailing Address 5115 BIRDWOOD

City
HOUSTON

State
TX

Zip Code
77096

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

H.I.S.D.

Occupation (for Individual)

TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2016

Transaction ID : INCA6655

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

30.00

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

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

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

FOR LINE NUMBER: PAGE 48 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. SANDS, SUSAN, , ,

Mailing Address 411 THRIFT ROAD

City
MALIBUState
CAZip Code
90265FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

57.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : INCA6641

Amount of Each Receipt this Period

7.14

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

B. SANDS, SUSAN, , ,

Mailing Address 411 THRIFT ROAD

City
MALIBUState
CAZip Code
90265FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

57.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : INCA6642

Amount of Each Receipt this Period

7.14

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

C. SANDS, SUSAN, , ,

Mailing Address 411 THRIFT ROAD

City
MALIBUState
CAZip Code
90265FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

57.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : INCA6644

Amount of Each Receipt this Period

7.14

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

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

21.42

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 49 OF 531
(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
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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)
WOMENCOUNT PACFull Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SANDS, SUSAN, , ,

Mailing Address 411 THRIFT ROAD

City
MALIBUState
CAZip Code
90265FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

57.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : INCA6643

Amount of Each Receipt this Period

7.14

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

Mailing Address 411 THRIFT ROAD

City
MALIBUState
CAZip Code
90265FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

57.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : INCA6646

Amount of Each Receipt this Period

7.14

☐ Memo Item

ERMK: MAGGIE FOR NH

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

Mailing Address 411 THRIFT ROAD

City
MALIBUState
CAZip Code
90265FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

57.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		12		2016

Transaction ID : INCA6645

Amount of Each Receipt this Period

7.14

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

21.42

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

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

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

FOR LINE NUMBER: PAGE 50 OF 531

(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)

WOMENCOUNT PAC

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

A. SANDS, SUSAN, , ,

Mailing Address 411 THRIFT ROAD

City
MALIBUState
CAZip Code
90265FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

57.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : INCA6648

Amount of Each Receipt this Period

7.14

☐ Memo Item

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

B. SANDS, SUSAN, , ,

Mailing Address 411 THRIFT ROAD

City
MALIBUState
CAZip Code
90265FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

57.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : INCA6647

Amount of Each Receipt this Period

7.16

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

C. WILLETT, BRENDA, , ,

Mailing Address 117 PINE ST

City
NACOGDOCHESState
TXZip Code
75965FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LONE STAR LEGAL AIDOccupation (for Individual)
LEGAL AID LAWYER

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
09 / 12 / 2016

Transaction ID : INCA6635

Amount of Each Receipt this Period

35.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

49.30

TOTAL This Period (last page this line number 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 531

(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)

WOMENCOUNT PAC

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

A. WILLETT, BRENDA, , ,

Mailing Address 117 PINE ST

City
NACOGDOCHES

State
TX

Zip Code
75965

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LONE STAR LEGAL AID

Occupation (for Individual)
LEGAL AID LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : INCA6636

Amount of Each Receipt this Period

35.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. WILLETT, BRENDA, , ,

Mailing Address 117 PINE ST

City
NACOGDOCHES

State
TX

Zip Code
75965

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LONE STAR LEGAL AID

Occupation (for Individual)
LEGAL AID LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : INCA6638

Amount of Each Receipt this Period

35.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

C. WILLETT, BRENDA, , ,

Mailing Address 117 PINE ST

City
NACOGDOCHES

State
TX

Zip Code
75965

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LONE STAR LEGAL AID

Occupation (for Individual)
LEGAL AID LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 12 / 2016

Transaction ID : INCA6640

Amount of Each Receipt this Period

35.00

☐ Memo Item

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 52 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. WILLETT, BRENDA, , ,

Mailing Address 117 PINE ST

City
NACOGDOCHES

State
TX

Zip Code
75965

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LONE STAR LEGAL AID

Occupation (for Individual)
LEGAL AID LAWYER

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
09 / 12 / 2016

Transaction ID : INCA6637

Amount of Each Receipt this Period

35.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

B. WILLETT, BRENDA, , ,

Mailing Address 117 PINE ST

City
NACOGDOCHES

State
TX

Zip Code
75965

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LONE STAR LEGAL AID

Occupation (for Individual)
LEGAL AID LAWYER

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
09 / 12 / 2016

Transaction ID : INCA6639

Amount of Each Receipt this Period

35.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

C. KANE, NAN, , ,

Mailing Address 2344 LAGUNA CIRCLE

City
AGOURA

State
CA

Zip Code
91301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 13 / 2016

Transaction ID : INCA6632

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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 53 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. KANE, NAN, , ,

Mailing Address 2344 LAGUNA CIRCLE

City
AGOURA

State
CA

Zip Code
91301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 13 / 2016

Transaction ID : INCA6631

Amount of Each Receipt this Period

40.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

B. KANE, NAN, , ,

Mailing Address 2344 LAGUNA CIRCLE

City
AGOURA

State
CA

Zip Code
91301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 13 / 2016

Transaction ID : INCA6633

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

C. KANE, NAN, , ,

Mailing Address 2344 LAGUNA CIRCLE

City
AGOURA

State
CA

Zip Code
91301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 13 / 2016

Transaction ID : INCA6634

Amount of Each Receipt this Period

5.00

☐ Memo Item

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 54 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6586

Amount of Each Receipt this Period

100.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

B. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6585

Amount of Each Receipt this Period

100.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

C. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6583

Amount of Each Receipt this Period

100.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

300.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 55 OF 531
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Transaction ID : INCA6581

Amount of Each Receipt this Period

100.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Transaction ID : INCA6584

Amount of Each Receipt this Period

100.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

C. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Transaction ID : INCA6582

Amount of Each Receipt this Period

100.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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 56 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6580

Amount of Each Receipt this Period

100.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

B. HARPER, JANE, , ,

Mailing Address PO BOX 955, 19 RESOLUTION ROAD

City

TRURO

State

MA

Zip Code

02666

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6593

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

C. HARPER, JANE, , ,

Mailing Address PO BOX 955, 19 RESOLUTION ROAD

City

TRURO

State

MA

Zip Code

02666

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6591

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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 57 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. HARPER, JANE, , ,

Mailing Address PO BOX 955, 19 RESOLUTION ROAD

City
TRUROState
MAZip Code
02666FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6590

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

B. HARPER, JANE, , ,

Mailing Address PO BOX 955, 19 RESOLUTION ROAD

City
TRUROState
MAZip Code
02666FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6592

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

C. HARPER, JANE, , ,

Mailing Address PO BOX 955, 19 RESOLUTION ROAD

City
TRUROState
MAZip Code
02666FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6589

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. HARPER, JANE, , ,

Mailing Address PO BOX 955, 19 RESOLUTION ROAD

City
TRUROState
MAZip Code
02666FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 14 / 2016

Transaction ID : INCA6587

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

B. HARPER, JANE, , ,

Mailing Address PO BOX 955, 19 RESOLUTION ROAD

City
TRUROState
MAZip Code
02666FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 14 / 2016

Transaction ID : INCA6588

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

C. HENDREN, ANNE, , ,

Mailing Address 2655 SW RAVENVIEW DRIVE

City
PORTLANDState
ORZip Code
97201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

75.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 09 / 14 / 2016

Transaction ID : INCA6614

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

25.00

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

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

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

FOR LINE NUMBER: PAGE 59 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. HENDREN, ANNE, , ,

Mailing Address 2655 SW RAVENVIEW DRIVE

City
PORTLAND

State
OR

Zip Code
97201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6613

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

B. HENDREN, ANNE, , ,

Mailing Address 2655 SW RAVENVIEW DRIVE

City
PORTLAND

State
OR

Zip Code
97201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6611

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

C. HENDREN, ANNE, , ,

Mailing Address 2655 SW RAVENVIEW DRIVE

City
PORTLAND

State
OR

Zip Code
97201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6612

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

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

15.00

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

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

FOR LINE NUMBER: PAGE 60 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. HENDREN, ANNE, , ,

Mailing Address 2655 SW RAVENSVIEW DRIVE

City
PORTLAND

State
OR

Zip Code
97201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6609

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. HENDREN, ANNE, , ,

Mailing Address 2655 SW RAVENSVIEW DRIVE

City
PORTLAND

State
OR

Zip Code
97201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6608

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

C. HENDREN, ANNE, , ,

Mailing Address 2655 SW RAVENSVIEW DRIVE

City
PORTLAND

State
OR

Zip Code
97201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

75.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6610

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

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

15.00

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

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

FOR LINE NUMBER: PAGE 61 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. JOHNSTON, MELISSA, , ,

Mailing Address 4050 NEW CASTLE ROAD

City
PULASKIState
PAZip Code
16143FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLARKCREEKOccupation (for Individual)
DOMESTIC GODDESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6624

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. JOHNSTON, MELISSA, , ,

Mailing Address 4050 NEW CASTLE ROAD

City
PULASKIState
PAZip Code
16143FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLARKCREEKOccupation (for Individual)
DOMESTIC GODDESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6628

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

C. JOHNSTON, MELISSA, , ,

Mailing Address 4050 NEW CASTLE ROAD

City
PULASKIState
PAZip Code
16143FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLARKCREEKOccupation (for Individual)
DOMESTIC GODDESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6627

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

30.00

TOTAL This Period (last page this line number 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 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. JOHNSTON, MELISSA, , ,

Mailing Address 4050 NEW CASTLE ROAD

City
PULASKIState
PAZip Code
16143FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLARKCREEKOccupation (for Individual)
DOMESTIC GODDESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6629

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

B. JOHNSTON, MELISSA, , ,

Mailing Address 4050 NEW CASTLE ROAD

City
PULASKIState
PAZip Code
16143FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLARKCREEKOccupation (for Individual)
DOMESTIC GODDESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6630

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. JOHNSTON, MELISSA, , ,

Mailing Address 4050 NEW CASTLE ROAD

City
PULASKIState
PAZip Code
16143FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLARKCREEKOccupation (for Individual)
DOMESTIC GODDESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6626

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

30.00

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

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

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

FOR LINE NUMBER: PAGE 63 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. JOHNSTON, MELISSA, , ,

Mailing Address 4050 NEW CASTLE ROAD

City
PULASKIState
PAZip Code
16143FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLARKCREEKOccupation (for Individual)
DOMESTIC GODDESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6625

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

B. JOHNSTON, MELISSA, , ,

Mailing Address 4050 NEW CASTLE ROAD

City
PULASKIState
PAZip Code
16143FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CLARKCREEKOccupation (for Individual)
DOMESTIC GODDESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6623

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

C. KAY, SUSAN, , ,

Mailing Address 4231 MONTAIR AVE.

City
LONG BEACHState
CAZip Code
90808FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6603

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

25.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 64 OF 531
(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)

WOMENCOUNT PAC

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

A. KAY, SUSAN, , ,

Mailing Address 4231 MONTAIR AVE.

City
LONG BEACHState
CAZip Code
90808FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Transaction ID : INCA6601

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

B. KAY, SUSAN, , ,

Mailing Address 4231 MONTAIR AVE.

City
LONG BEACHState
CAZip Code
90808FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Transaction ID : INCA6606

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

C. KAY, SUSAN, , ,

Mailing Address 4231 MONTAIR AVE.

City
LONG BEACHState
CAZip Code
90808FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Transaction ID : INCA6602

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

15.00

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

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

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

FOR LINE NUMBER: PAGE 65 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. KAY, SUSAN, , ,

Mailing Address 4231 MONTAIR AVE.

City
LONG BEACH

State
CA

Zip Code
90808

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6605

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

B. KAY, SUSAN, , ,

Mailing Address 4231 MONTAIR AVE.

City
LONG BEACH

State
CA

Zip Code
90808

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6604

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

C. KAY, SUSAN, , ,

Mailing Address 4231 MONTAIR AVE.

City
LONG BEACH

State
CA

Zip Code
90808

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6607

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

15.00

TOTAL This Period (last 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)

WOMENCOUNT PAC

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

A. KHAN, KAY, , ,

Mailing Address 18 ST. MARY'S STREET

City
NEWTON

State
MA

Zip Code
2462

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMONWEALTH OF MA

Occupation (for Individual)
STATE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.71

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6618

Amount of Each Receipt this Period

35.71

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

B. KHAN, KAY, , ,

Mailing Address 18 ST. MARY'S STREET

City
NEWTON

State
MA

Zip Code
2462

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMONWEALTH OF MA

Occupation (for Individual)
STATE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.71

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6615

Amount of Each Receipt this Period

35.71

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

C. KHAN, KAY, , ,

Mailing Address 18 ST. MARY'S STREET

City
NEWTON

State
MA

Zip Code
2462

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMONWEALTH OF MA

Occupation (for Individual)
STATE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.71

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6619

Amount of Each Receipt this Period

35.71

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

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

107.13

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

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

FOR LINE NUMBER: PAGE 67 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. KHAN, KAY, , ,

Mailing Address 18 ST. MARY'S STREET

City
NEWTONState
MAZip Code
2462FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMONWEALTH OF MAOccupation (for Individual)
STATE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6620

Amount of Each Receipt this Period

35.71

☐ Memo Item

ERMK: MAGGIE FOR NH

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

B. KHAN, KAY, , ,

Mailing Address 18 ST. MARY'S STREET

City
NEWTONState
MAZip Code
2462FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMONWEALTH OF MAOccupation (for Individual)
STATE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6617

Amount of Each Receipt this Period

35.71

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

C. KHAN, KAY, , ,

Mailing Address 18 ST. MARY'S STREET

City
NEWTONState
MAZip Code
2462FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMONWEALTH OF MAOccupation (for Individual)
STATE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

285.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6616

Amount of Each Receipt this Period

35.71

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

107.13

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

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

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

FOR LINE NUMBER: PAGE 68 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. KHAN, KAY, , ,

Mailing Address 18 ST. MARY'S STREET

City
NEWTONState
MAZip Code
2462FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMONWEALTH OF MAOccupation (for Individual)
STATE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6622

Amount of Each Receipt this Period

35.71

☐ Memo Item

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

B. KHAN, KAY, , ,

Mailing Address 18 ST. MARY'S STREET

City
NEWTONState
MAZip Code
2462FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
COMMONWEALTH OF MAOccupation (for Individual)
STATE REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.71

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6621

Amount of Each Receipt this Period

35.74

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

C. RADER-WILSON, THERESA, , ,

Mailing Address 8175 HENDERSON RIDGE DR

City
MOORESVILLEState
INZip Code
46158FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED, SAME NAMEOccupation (for Individual)
PSYCHOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6596

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: MONICA VERNON FOR CONGRESS

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

91.45

TOTAL This Period (last 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)

WOMENCOUNT PAC

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

A. RADER-WILSON, THERESA, , ,

Mailing Address 8175 HENDERSON RIDGE DR

City
MOORESVILLE

State
IN

Zip Code
46158

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED, SAME NAME

Occupation (for Individual)
PSYCHOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6598

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: CARROLL FOR COLORADO

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

B. RADER-WILSON, THERESA, , ,

Mailing Address 8175 HENDERSON RIDGE DR

City
MOORESVILLE

State
IN

Zip Code
46158

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED, SAME NAME

Occupation (for Individual)
PSYCHOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6597

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: CAROL SHEA-PORTER FOR CONGRESS

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

C. RADER-WILSON, THERESA, , ,

Mailing Address 8175 HENDERSON RIDGE DR

City
MOORESVILLE

State
IN

Zip Code
46158

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED, SAME NAME

Occupation (for Individual)
PSYCHOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6600

Amount of Each Receipt this Period

150.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

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

190.00

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

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

FOR LINE NUMBER: PAGE 70 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. RADER-WILSON, THERESA, , ,

Mailing Address 8175 HENDERSON RIDGE DR

City
MOORESVILLE

State
IN

Zip Code
46158

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED, SAME NAME

Occupation (for Individual)
PSYCHOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6599

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: CAIN FOR CONGRESS

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

B. RADER-WILSON, THERESA, , ,

Mailing Address 8175 HENDERSON RIDGE DR

City
MOORESVILLE

State
IN

Zip Code
46158

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED, SAME NAME

Occupation (for Individual)
PSYCHOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6594

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: FRIENDS OF ANNA THRONE-HOLST

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

C. RADER-WILSON, THERESA, , ,

Mailing Address 8175 HENDERSON RIDGE DR

City
MOORESVILLE

State
IN

Zip Code
46158

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED, SAME NAME

Occupation (for Individual)
PSYCHOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2016

Transaction ID : INCA6595

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: COLLEEN DEACON FOR CONGRESS

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 71 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. BAYSINGER, KARA, , ,

Mailing Address 23 CRAIG AVE

City
PIEDMONTState
CAZip Code
94611FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DENTONS US LLPOccupation (for Individual)
ATTORNEY/ PARTNER

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
09 / 15 / 2016

Transaction ID : INCA6579

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

B. COTTON, BETSY, , ,

Mailing Address 65 EVERGREEN LANE

City
BERKELEYState
CAZip Code
94705FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4060.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : INCA6578

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. COTTON, BETSY, , ,

Mailing Address 65 EVERGREEN LANE

City
BERKELEYState
CAZip Code
94705FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4060.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : INCA6577

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

2005.00

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

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

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

FOR LINE NUMBER: PAGE 72 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. PHIPPS PRICE, ELEANOR, , ,

Mailing Address 14 MAYBRIDGE RD

City
BELVEDERE

State
CA

Zip Code
94920

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
INVESTOR

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
09 / 16 / 2016

Transaction ID : INCA6576

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. POWELL, MARY, , ,

Mailing Address 161 RANDALL STREET

City
SAN FRANCISCO

State
CA

Zip Code
94131

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TRUCKER HUSS

Occupation (for Individual)
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
09 / 17 / 2016

Transaction ID : INCA6575

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

C. WALKER, LISA, , ,

Mailing Address 612 PROSPECT AVE, 2

City
BROOKLYN

State
NY

Zip Code
11215

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : INCA6570

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

2005.00

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

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. WALKER, LISA, , ,

Mailing Address 612 PROSPECT AVE, 2

City
BROOKLYNState
NYZip Code
11215FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : INCA6571

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

B. WALKER, LISA, , ,

Mailing Address 612 PROSPECT AVE, 2

City
BROOKLYNState
NYZip Code
11215FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : INCA6572

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

C. WALKER, LISA, , ,

Mailing Address 612 PROSPECT AVE, 2

City
BROOKLYNState
NYZip Code
11215FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : INCA6574

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

15.00

TOTAL This Period (last page this line number 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 531

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. WALKER, LISA, , ,

Mailing Address 612 PROSPECT AVE, 2

City
BROOKLYNState
NYZip Code
11215FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : INCA6573

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

B. WALKER, LISA, , ,

Mailing Address 612 PROSPECT AVE, 2

City
BROOKLYNState
NYZip Code
11215FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2016

Transaction ID : INCA6569

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

C. HWANG, SUSIE, , ,

Mailing Address 159 MELVILLE AVE

City
PALO ALTOState
CAZip Code
94301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED

Occupation (for Individual)

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : INCA6560

Amount of Each Receipt this Period

250.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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)
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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)

WOMENCOUNT PAC

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

A. HWANG, SUSIE, , ,

Mailing Address 159 MELVILLE AVE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

INFORMATION REQUESTED

Occupation (for Individual)

INFORMATION REQUESTED

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : INCA6561

Amount of Each Receipt this Period

250.00

☐ Memo Item

ERMK: CATHERINE CORTEZ MASTO FOR SENATE

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

B. MUKHOPADHYAY, CAROL, , ,

Mailing Address 30 WEST POINT PLACE

City

SAN MATEO

State

CA

Zip Code

94402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : INCA6564

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

C. MUKHOPADHYAY, CAROL, , ,

Mailing Address 30 WEST POINT PLACE

City

SAN MATEO

State

CA

Zip Code

94402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : INCA6565

Amount of Each Receipt this Period

10.00

☐ Memo Item

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 76 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. MUKHOPADHYAY, CAROL, , ,

Mailing Address 30 WEST POINT PLACE

City
SAN MATEO

State
CA

Zip Code
94402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : INCA6566

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

B. MUKHOPADHYAY, CAROL, , ,

Mailing Address 30 WEST POINT PLACE

City
SAN MATEO

State
CA

Zip Code
94402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : INCA6568

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

C. MUKHOPADHYAY, CAROL, , ,

Mailing Address 30 WEST POINT PLACE

City
SAN MATEO

State
CA

Zip Code
94402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : INCA6567

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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: PAGE 77 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. MUKHOPADHYAY, CAROL, , ,

Mailing Address 30 WEST POINT PLACE

City
SAN MATEOState
CAZip Code
94402FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : INCA6563

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. MUKHOPADHYAY, CAROL, , ,

Mailing Address 30 WEST POINT PLACE

City
SAN MATEOState
CAZip Code
94402FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 18 / 2016

Transaction ID : INCA6562

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

C. BOAS, PATTY, , ,

Mailing Address 1533 DANA AVENUE

City
PALO ALTOState
CAZip Code
94303FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAMEOccupation (for Individual)
MARKETING AND MANAGEMENT COI

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6512

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

25.00

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

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

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

FOR LINE NUMBER: PAGE 78 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. BOAS, PATTY, , ,

Mailing Address 1533 DANA AVENUE

City

PALO ALTO

State

CA

Zip Code

94303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

MARKETING AND MANAGEMENT CO

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016

Transaction ID : INCA6513

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. BOAS, PATTY, , ,

Mailing Address 1533 DANA AVENUE

City

PALO ALTO

State

CA

Zip Code

94303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

MARKETING AND MANAGEMENT CC

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016

Transaction ID : INCA6514

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

C. BOAS, PATTY, , ,

Mailing Address 1533 DANA AVENUE

City

PALO ALTO

State

CA

Zip Code

94303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

MARKETING AND MANAGEMENT COI

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 / 19 / 2016

Transaction ID : INCA6515

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

15.00

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

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

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

FOR LINE NUMBER: PAGE 79 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. BOAS, PATTY, , ,

Mailing Address 1533 DANA AVENUE

City

PALO ALTO

State

CA

Zip Code

94303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

MARKETING AND MANAGEMENT CO

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6511

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

B. BOAS, PATTY, , ,

Mailing Address 1533 DANA AVENUE

City

PALO ALTO

State

CA

Zip Code

94303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

MARKETING AND MANAGEMENT CC

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6517

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

C. BOAS, PATTY, , ,

Mailing Address 1533 DANA AVENUE

City

PALO ALTO

State

CA

Zip Code

94303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

MARKETING AND MANAGEMENT COI

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6516

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

15.00

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

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

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

FOR LINE NUMBER: PAGE 80 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. BROWN, ELLEN, , ,

Mailing Address 3549 JULIE CT

City

PALO ALTO

State

CA

Zip Code

94306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

PATHWAYS HOSPICE

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6551

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

B. BROWN, ELLEN, , ,

Mailing Address 3549 JULIE CT

City

PALO ALTO

State

CA

Zip Code

94306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

PATHWAYS HOSPICE

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6550

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

C. BROWN, ELLEN, , ,

Mailing Address 3549 JULIE CT

City

PALO ALTO

State

CA

Zip Code

94306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

PATHWAYS HOSPICE

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6549

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

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

30.00

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 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. BROWN, ELLEN, , ,

Mailing Address 3549 JULIE CT

City

PALO ALTO

State

CA

Zip Code

94306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

PATHWAYS HOSPICE

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

09 / 19 / 2016

Transaction ID : INCA6552

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

B. BROWN, ELLEN, , ,

Mailing Address 3549 JULIE CT

City

PALO ALTO

State

CA

Zip Code

94306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

PATHWAYS HOSPICE

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

09 / 19 / 2016

Transaction ID : INCA6547

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

C. BROWN, ELLEN, , ,

Mailing Address 3549 JULIE CT

City

PALO ALTO

State

CA

Zip Code

94306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

PATHWAYS HOSPICE

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

70.00

Date of Receipt

09 / 19 / 2016

Transaction ID : INCA6548

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

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

30.00

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

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

FOR LINE NUMBER: PAGE 82 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. BROWN, ELLEN, , ,

Mailing Address 3549 JULIE CT

City

PALO ALTO

State

CA

Zip Code

94306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

PATHWAYS HOSPICE

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

70.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6546

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

B. CHRISTIN, JOHN, , ,

Mailing Address 892 NEVADA AVE

City

SAN JOSE

State

CA

Zip Code

95125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

PAYPAL

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6483

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

C. CHRISTIN, JOHN, , ,

Mailing Address 892 NEVADA AVE

City

SAN JOSE

State

CA

Zip Code

95125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

PAYPAL

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6487

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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: PAGE 83 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. CHRISTIN, JOHN, , ,

Mailing Address 892 NEVADA AVE

City
SAN JOSE

State
CA

Zip Code
95125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PAYPAL

Occupation (for Individual)
ATTORNEY

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
09 / 19 / 2016

Transaction ID : INCA6482

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

B. CHRISTIN, JOHN, , ,

Mailing Address 892 NEVADA AVE

City
SAN JOSE

State
CA

Zip Code
95125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PAYPAL

Occupation (for Individual)
ATTORNEY

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
09 / 19 / 2016

Transaction ID : INCA6486

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

C. CHRISTIN, JOHN, , ,

Mailing Address 892 NEVADA AVE

City
SAN JOSE

State
CA

Zip Code
95125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PAYPAL

Occupation (for Individual)
ATTORNEY

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
09 / 19 / 2016

Transaction ID : INCA6481

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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 84 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. CHRISTIN, JOHN, , ,

Mailing Address 892 NEVADA AVE

City
SAN JOSE

State
CA

Zip Code
95125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PAYPAL

Occupation (for Individual)
ATTORNEY

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
09 / 19 / 2016

Transaction ID : INCA6485

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

B. CHRISTIN, JOHN, , ,

Mailing Address 892 NEVADA AVE

City
SAN JOSE

State
CA

Zip Code
95125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PAYPAL

Occupation (for Individual)
ATTORNEY

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
09 / 19 / 2016

Transaction ID : INCA6484

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

C. CHUPP, BARB, , ,

Mailing Address 34 FIVE FIELDS ROAD

City
MADISN

State
CT

Zip Code
6443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIFESPAN

Occupation (for Individual)
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

40.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6536

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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: PAGE 85 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CHUPP, BARB, , ,

Mailing Address **34 FIVE FIELDS ROAD**

City
MADISN

State
CT

Zip Code
6443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIFESPAN

Occupation (for Individual)
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

09 / 19 / 2016

Transaction ID : INCA6537

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

Mailing Address **34 FIVE FIELDS ROAD**

City
MADISN

State
CT

Zip Code
6443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIFESPAN

Occupation (for Individual)
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

09 / 19 / 2016

Transaction ID : INCA6530

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

Mailing Address **34 FIVE FIELDS ROAD**

City
MADISN

State
CT

Zip Code
6443

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIFESPAN

Occupation (for Individual)
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

40.00

Date of Receipt

09 / 19 / 2016

Transaction ID : INCA6531

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

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

15.00

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 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. CHUPP, BARB, , ,

Mailing Address 34 FIVE FIELDS ROAD

City
MADISNState
CTZip Code
6443FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIFESPANOccupation (for Individual)
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6532

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. CHUPP, BARB, , ,

Mailing Address 34 FIVE FIELDS ROAD

City
MADISNState
CTZip Code
6443FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIFESPANOccupation (for Individual)
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6533

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

C. CHUPP, BARB, , ,

Mailing Address 34 FIVE FIELDS ROAD

City
MADISNState
CTZip Code
6443FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIFESPANOccupation (for Individual)
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

40.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6534

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

15.00

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

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

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

FOR LINE NUMBER: PAGE 87 OF 531

(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. CHUPP, BARB, , ,

Mailing Address 34 FIVE FIELDS ROAD

City
MADISONState
CTZip Code
6443FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

LIFESPAN

Occupation (for Individual)

LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6535

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

B. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6489

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

C. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6491

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

15.00

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

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

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

FOR LINE NUMBER: PAGE 88 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6488

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

B. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6494

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

C. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STUBHUB

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

7125.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6492

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

15.00

TOTAL This Period (last page this line number 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 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. COHEN, TOD, , ,</p> <p>Mailing Address 839 MELVILLE AVENUE</p> <table border="1"> <tr> <td>City PALO ALTO</td> <td>State CA</td> <td>Zip Code 94301</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table border="1"> <tr> <td>Name of Employer (for Individual) STUBHUB</td> <td>Occupation (for Individual) ATTORNEY</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 7125.00</p>			City PALO ALTO	State CA	Zip Code 94301	Name of Employer (for Individual) STUBHUB	Occupation (for Individual) ATTORNEY	<p>Date of Receipt 09 / 19 / 2016 Transaction ID : INCA6490 </p> <p>Amount of Each Receipt this Period 5.00 </p> <p><input type="checkbox"/> Memo Item ERMK: KATIE MCGINTY FOR SENATE </p>	
City PALO ALTO	State CA	Zip Code 94301							
Name of Employer (for Individual) STUBHUB	Occupation (for Individual) ATTORNEY								
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. COHEN, TOD, , ,</p> <p>Mailing Address 839 MELVILLE AVENUE</p> <table border="1"> <tr> <td>City PALO ALTO</td> <td>State CA</td> <td>Zip Code 94301</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table border="1"> <tr> <td>Name of Employer (for Individual) STUBHUB</td> <td>Occupation (for Individual) ATTORNEY</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 7125.00</p>			City PALO ALTO	State CA	Zip Code 94301	Name of Employer (for Individual) STUBHUB	Occupation (for Individual) ATTORNEY	<p>Date of Receipt 09 / 19 / 2016 Transaction ID : INCA6493 </p> <p>Amount of Each Receipt this Period 5.00 </p> <p><input type="checkbox"/> Memo Item ERMK: DEBORAH ROSS FOR SENATE </p>	
City PALO ALTO	State CA	Zip Code 94301							
Name of Employer (for Individual) STUBHUB	Occupation (for Individual) ATTORNEY								
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DEHOVITZ, ANN, , ,</p> <p>Mailing Address 853 SHARON CT</p> <table border="1"> <tr> <td>City PALO ALTO</td> <td>State CA</td> <td>Zip Code 94301</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table border="1"> <tr> <td>Name of Employer (for Individual) GIDEON HAUSNER JEWISH DAY SCHOOL</td> <td>Occupation (for Individual) TEACHER</td> </tr> </table> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) </p> <p>Aggregate Year-to-Date ▼ 30.00</p>			City PALO ALTO	State CA	Zip Code 94301	Name of Employer (for Individual) GIDEON HAUSNER JEWISH DAY SCHOOL	Occupation (for Individual) TEACHER	<p>Date of Receipt 09 / 19 / 2016 Transaction ID : INCA6521 </p> <p>Amount of Each Receipt this Period 5.00 </p> <p><input type="checkbox"/> Memo Item ERMK: KIRKPATRICK FOR SENATE </p>	
City PALO ALTO	State CA	Zip Code 94301							
Name of Employer (for Individual) GIDEON HAUSNER JEWISH DAY SCHOOL	Occupation (for Individual) TEACHER								
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			<p>15.00</p>						
<p>TOTAL This Period (last page this line number only)..... ▶</p>									

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

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

FOR LINE NUMBER: PAGE 90 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. DEHOVITZ, ANN, , ,

Mailing Address 853 SHARON CT

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

GIDEON HAUSNER JEWISH DAY SCHOOL

Occupation (for Individual)

TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6523

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

B. DEHOVITZ, ANN, , ,

Mailing Address 853 SHARON CT

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

GIDEON HAUSNER JEWISH DAY SCHOOL

Occupation (for Individual)

TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6518

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

C. DEHOVITZ, ANN, , ,

Mailing Address 853 SHARON CT

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

GIDEON HAUSNER JEWISH DAY SCHOOL

Occupation (for Individual)

TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6522

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

15.00

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

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

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

FOR LINE NUMBER: PAGE 91 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. DEHOVITZ, ANN, , ,

Mailing Address 853 SHARON CT

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

GIDEON HAUSNER JEWISH DAY SCHOOL

Occupation (for Individual)

TEACHER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6520

Amount of Each Receipt this Period

5.00

☐

Memo Item

ERMK: TAMMY FOR ILLINOIS

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

B. DEHOVITZ, ANN, , ,

Mailing Address 853 SHARON CT

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

GIDEON HAUSNER JEWISH DAY SCHOOL

Occupation (for Individual)

TEACHER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6519

Amount of Each Receipt this Period

5.00

☐

Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

C. HANDLER, EMERI, , ,

Mailing Address 434 SEALE AVE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CHALLENGE SUCCESS

Occupation (for Individual)

PARENT EDUCATOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6459

Amount of Each Receipt this Period

5.00

☐

Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

15.00

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

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

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

FOR LINE NUMBER: PAGE 92 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. HANDLER, EMERI, , ,

Mailing Address 434 SEALE AVE

City
PALO ALTOState
CAZip Code
94301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CHALLENGE SUCCESSOccupation (for Individual)
PARENT EDUCATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6458

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

B. HANDLER, EMERI, , ,

Mailing Address 434 SEALE AVE

City
PALO ALTOState
CAZip Code
94301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CHALLENGE SUCCESSOccupation (for Individual)
PARENT EDUCATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6457

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

C. HANDLER, EMERI, , ,

Mailing Address 434 SEALE AVE

City
PALO ALTOState
CAZip Code
94301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CHALLENGE SUCCESSOccupation (for Individual)
PARENT EDUCATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6456

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

15.00

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

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 93 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. HANDLER, EMERI, , ,

Mailing Address 434 SEALE AVE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CHALLENGE SUCCESS

Occupation (for Individual)

PARENT EDUCATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6460

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

B. HANDLER, EMERI, , ,

Mailing Address 434 SEALE AVE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CHALLENGE SUCCESS

Occupation (for Individual)

PARENT EDUCATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6454

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

C. HANDLER, EMERI, , ,

Mailing Address 434 SEALE AVE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CHALLENGE SUCCESS

Occupation (for Individual)

PARENT EDUCATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6455

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

15.00

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

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

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

FOR LINE NUMBER: PAGE 94 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. HUNT-SCOTT, SHANNON, , ,

Mailing Address 16348 AZTEC RIDGE DR

City
LOS GATOS

State
CA

Zip Code
95030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE SCOTT FOUNDATION

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6526

Amount of Each Receipt this Period

50.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

B. HUNT-SCOTT, SHANNON, , ,

Mailing Address 16348 AZTEC RIDGE DR

City
LOS GATOS

State
CA

Zip Code
95030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE SCOTT FOUNDATION

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6528

Amount of Each Receipt this Period

50.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

C. HUNT-SCOTT, SHANNON, , ,

Mailing Address 16348 AZTEC RIDGE DR

City
LOS GATOS

State
CA

Zip Code
95030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE SCOTT FOUNDATION

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6529

Amount of Each Receipt this Period

50.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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 95 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. HUNT-SCOTT, SHANNON, , ,

Mailing Address 16348 AZTEC RIDGE DR

City
LOS GATOS

State
CA

Zip Code
95030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE SCOTT FOUNDATION

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6525

Amount of Each Receipt this Period

50.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. HUNT-SCOTT, SHANNON, , ,

Mailing Address 16348 AZTEC RIDGE DR

City
LOS GATOS

State
CA

Zip Code
95030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE SCOTT FOUNDATION

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6524

Amount of Each Receipt this Period

50.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

C. HUNT-SCOTT, SHANNON, , ,

Mailing Address 16348 AZTEC RIDGE DR

City
LOS GATOS

State
CA

Zip Code
95030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE SCOTT FOUNDATION

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6527

Amount of Each Receipt this Period

50.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

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

150.00

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)

WOMENCOUNT PAC

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

A. JOHNSON, LARA, , ,

Mailing Address 1630 N. ADAMS STREET

City
ARLINGTON

State
VA

Zip Code
22201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

140.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6467

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

B. JOHNSON, LARA, , ,

Mailing Address 1630 N. ADAMS STREET

City
ARLINGTON

State
VA

Zip Code
22201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

140.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6472

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

C. JOHNSON, LARA, , ,

Mailing Address 1630 N. ADAMS STREET

City
ARLINGTON

State
VA

Zip Code
22201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

140.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6471

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

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

60.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. JOHNSON, LARA, , ,

Mailing Address 1630 N. ADAMS STREET

City
ARLINGTON

State
VA

Zip Code
22201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

140.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6468

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. JOHNSON, LARA, , ,

Mailing Address 1630 N. ADAMS STREET

City
ARLINGTON

State
VA

Zip Code
22201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

140.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6469

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

C. JOHNSON, LARA, , ,

Mailing Address 1630 N. ADAMS STREET

City
ARLINGTON

State
VA

Zip Code
22201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

140.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6466

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

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

60.00

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)

WOMENCOUNT PAC

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

A. JOHNSON, LARA, , ,

Mailing Address 1630 N. ADAMS STREET

City
ARLINGTONState
VAZip Code
22201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

140.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6470

Amount of Each Receipt this Period

20.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

B. MASON, STACY, , ,

Mailing Address 839 MELVILLE AVENUE

City
PALO ALTOState
CAZip Code
94301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WOMENCOUNTOccupation (for Individual)
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10835.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6556

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

C. MASON, STACY, , ,

Mailing Address 839 MELVILLE AVENUE

City
PALO ALTOState
CAZip Code
94301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WOMENCOUNTOccupation (for Individual)
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10835.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6555

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

30.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. MASON, STACY, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

WOMENCOUNT

Occupation (for Individual)

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

10835.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6553

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

B. MASON, STACY, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

WOMENCOUNT

Occupation (for Individual)

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

10835.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6554

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

C. MASON, STACY, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

WOMENCOUNT

Occupation (for Individual)

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

10835.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6558

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

15.00

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

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. MASON, STACY, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

WOMENCOUNT

Occupation (for Individual)

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10835.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6559

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

B. MASON, STACY, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

WOMENCOUNT

Occupation (for Individual)

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10835.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6557

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

C. MYERS, MARGO, , ,

Mailing Address 723 ALVARADO ROW

City

STANFORD

State

CA

Zip Code

94305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MARGO MEYERS COMMUNICATIONS

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

160.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6507

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

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

15.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. MYERS, MARGO, , ,

Mailing Address 723 ALVARADO ROW

City
STANFORD

State
CA

Zip Code
94305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MARGO MEYERS COMMUNICATIONS

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

160.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6510

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

B. MYERS, MARGO, , ,

Mailing Address 723 ALVARADO ROW

City
STANFORD

State
CA

Zip Code
94305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MARGO MEYERS COMMUNICATIONS

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

160.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6508

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

C. MYERS, MARGO, , ,

Mailing Address 723 ALVARADO ROW

City
STANFORD

State
CA

Zip Code
94305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MARGO MEYERS COMMUNICATIONS

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

160.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6506

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

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

25.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

WOMENCOUNT PAC

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

A. MYERS, MARGO, , ,

Mailing Address 723 ALVARADO ROW

City
STANFORDState
CAZip Code
94305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MARGO MEYERS COMMUNICATIONS

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

160.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : INCA6509

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

B. MYERS, MARGO, , ,

Mailing Address 723 ALVARADO ROW

City
STANFORDState
CAZip Code
94305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MARGO MEYERS COMMUNICATIONS

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

160.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : INCA6504

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

C. MYERS, MARGO, , ,

Mailing Address 723 ALVARADO ROW

City
STANFORDState
CAZip Code
94305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

MARGO MEYERS COMMUNICATIONS

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

160.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : INCA6503

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

15.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 103 OF 531
(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)

WOMENCOUNT PAC

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

A. MYERS, MARGO, , ,

Mailing Address 723 ALVARADO ROW

City
STANFORDState
CAZip Code
94305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MARGO MEYERS COMMUNICATIONSOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

160.00

Date of Receipt

M M	D D	Y Y Y Y
09	19	2016

Transaction ID : INCA6505

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. NEWSTAT, JOYCE, , ,

Mailing Address 1200 CALIFONIA STREET 27C

City
SAN FRANCISCOState
CAZip Code
94109FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROCKET SCIENCE ASSOCIATESOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M	D D	Y Y Y Y
09	19	2016

Transaction ID : INCA6543

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

C. NEWSTAT, JOYCE, , ,

Mailing Address 1200 CALIFONIA STREET 27C

City
SAN FRANCISCOState
CAZip Code
94109FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROCKET SCIENCE ASSOCIATESOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M	D D	Y Y Y Y
09	19	2016

Transaction ID : INCA6544

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

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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)

WOMENCOUNT PAC

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

A. NEWSTAT, JOYCE, , ,

Mailing Address 1200 CALIFONIA STREET 27C

City
SAN FRANCISCO

State
CA

Zip Code
94109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROCKET SCIENCE ASSOCIATES

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6542

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

B. NEWSTAT, JOYCE, , ,

Mailing Address 1200 CALIFONIA STREET 27C

City
SAN FRANCISCO

State
CA

Zip Code
94109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROCKET SCIENCE ASSOCIATES

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6539

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

C. NEWSTAT, JOYCE, , ,

Mailing Address 1200 CALIFONIA STREET 27C

City
SAN FRANCISCO

State
CA

Zip Code
94109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROCKET SCIENCE ASSOCIATES

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6538

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. NEWSTAT, JOYCE, , ,

Mailing Address 1200 CALIFONIA STREET 27C

City
SAN FRANCISCO

State
CA

Zip Code
94109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROCKET SCIENCE ASSOCIATES

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6545

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

B. NEWSTAT, JOYCE, , ,

Mailing Address 1200 CALIFONIA STREET 27C

City
SAN FRANCISCO

State
CA

Zip Code
94109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROCKET SCIENCE ASSOCIATES

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6541

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

C. NEWSTAT, JOYCE, , ,

Mailing Address 1200 CALIFONIA STREET 27C

City
SAN FRANCISCO

State
CA

Zip Code
94109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROCKET SCIENCE ASSOCIATES

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6540

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

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

45.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. RAO, AMY, , ,

Mailing Address **228 SEALE AVE.**

City
PALO ALTO

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IAS

Occupation (for Individual)
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19900.00

Date of Receipt

09 / 19 / 2016

Transaction ID : INCA6465

Amount of Each Receipt this Period

200.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

Mailing Address **228 SEALE AVE.**

City
PALO ALTO

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IAS

Occupation (for Individual)
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19900.00

Date of Receipt

09 / 19 / 2016

Transaction ID : INCA6461

Amount of Each Receipt this Period

200.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

Mailing Address **228 SEALE AVE.**

City
PALO ALTO

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IAS

Occupation (for Individual)
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

19900.00

Date of Receipt

09 / 19 / 2016

Transaction ID : INCA6463

Amount of Each Receipt this Period

200.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 107 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. RAO, AMY, , ,

Mailing Address 228 SEALE AVE.

City
PALO ALTO

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IAS

Occupation (for Individual)
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6462

Amount of Each Receipt this Period

200.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

B. RAO, AMY, , ,

Mailing Address 228 SEALE AVE.

City
PALO ALTO

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
IAS

Occupation (for Individual)
ENTREPRENEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6464

Amount of Each Receipt this Period

200.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

C. ROY, JULIA, , ,

Mailing Address 341 RAQUEL LANE

City
LOS ALTOS

State
CA

Zip Code
94022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6476

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

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

405.00

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 108 OF 531

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. ROY, JULIA, , ,

Mailing Address 341 RAQUEL LANE

City
LOS ALTOS

State
CA

Zip Code
94022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6474

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

B. ROY, JULIA, , ,

Mailing Address 341 RAQUEL LANE

City
LOS ALTOS

State
CA

Zip Code
94022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6480

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

C. ROY, JULIA, , ,

Mailing Address 341 RAQUEL LANE

City
LOS ALTOS

State
CA

Zip Code
94022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6473

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

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

25.00

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

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

FOR LINE NUMBER: PAGE 109 OF 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. ROY, JULIA, , ,

Mailing Address 341 RAQUEL LANE

City
LOS ALTOS

State
CA

Zip Code
94022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6478

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

B. ROY, JULIA, , ,

Mailing Address 341 RAQUEL LANE

City
LOS ALTOS

State
CA

Zip Code
94022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6479

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

C. ROY, JULIA, , ,

Mailing Address 341 RAQUEL LANE

City
LOS ALTOS

State
CA

Zip Code
94022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6475

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

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

15.00

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 531

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. ROY, JULIA, , ,

Mailing Address 341 RAQUEL LANE

City
LOS ALTOS

State
CA

Zip Code
94022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6477

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

B. STERN, ANDREA, , ,

Mailing Address 730 SEALE AVE

City
PALO ALTO

State
CA

Zip Code
94303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6496

Amount of Each Receipt this Period

35.71

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

C. STERN, ANDREA, , ,

Mailing Address 730 SEALE AVE

City
PALO ALTO

State
CA

Zip Code
94303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6497

Amount of Each Receipt this Period

35.71

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

76.42

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

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

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)

WOMENCOUNT PAC

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

A. STERN, ANDREA, , ,

Mailing Address 730 SEALE AVE

City

PALO ALTO

State

CA

Zip Code

94303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 19 / 2016

Transaction ID : INCA6495

Amount of Each Receipt this Period

35.71

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

B. STERN, ANDREA, , ,

Mailing Address 730 SEALE AVE

City

PALO ALTO

State

CA

Zip Code

94303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 19 / 2016

Transaction ID : INCA6501

Amount of Each Receipt this Period

35.74

☐ Memo Item

ERMK: MAGGIE FOR NH

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

C. STERN, ANDREA, , ,

Mailing Address 730 SEALE AVE

City

PALO ALTO

State

CA

Zip Code

94303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 19 / 2016

Transaction ID : INCA6498

Amount of Each Receipt this Period

35.71

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

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

107.16

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. STERN, ANDREA, , ,

Mailing Address 730 SEALE AVE

City

PALO ALTO

State

CA

Zip Code

94303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6499

Amount of Each Receipt this Period

35.71

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

B. STERN, ANDREA, , ,

Mailing Address 730 SEALE AVE

City

PALO ALTO

State

CA

Zip Code

94303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6502

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. STERN, ANDREA, , ,

Mailing Address 730 SEALE AVE

City

PALO ALTO

State

CA

Zip Code

94303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2016

Transaction ID : INCA6500

Amount of Each Receipt this Period

35.71

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

321.42

TOTAL This Period (last 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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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. COHEN, ELIZA, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

KENYON COLLEGE

Occupation (for Individual)

STUDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 20 / 2016

Transaction ID : INCA6452

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

B. COHEN, ELIZA, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

KENYON COLLEGE

Occupation (for Individual)

STUDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 20 / 2016

Transaction ID : INCA6447

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. COHEN, ELIZA, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

KENYON COLLEGE

Occupation (for Individual)

STUDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 20 / 2016

Transaction ID : INCA6448

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PATTY JUDGE FOR IOWA

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

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

15.00

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. COHEN, ELIZA, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

KENYON COLLEGE

Occupation (for Individual)

STUDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 20 / 2016

Transaction ID : INCA6449

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. COHEN, ELIZA, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

KENYON COLLEGE

Occupation (for Individual)

STUDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 20 / 2016

Transaction ID : INCA6450

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

C. COHEN, ELIZA, , ,

Mailing Address 839 MELVILLE AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

KENYON COLLEGE

Occupation (for Individual)

STUDENT

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 20 / 2016

Transaction ID : INCA6453

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

15.00

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

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. COHEN, ELIZA, , ,

Mailing Address **839 MELVILLE AVENUE**

City
PALO ALTO

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KENYON COLLEGE

Occupation (for Individual)
STUDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

09 / 20 / 2016

Transaction ID : INCA6451

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

Mailing Address **40 ROCK RD**

City
KENTFIELD

State
CA

Zip Code
94904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
COMMUNITY VOLUNTEER ACTIVIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

09 / 21 / 2016

Transaction ID : INCA6446

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

Mailing Address **60 DINSMORE AVE. 416**

City
FRAMINGHAM

State
MA

Zip Code
01702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
DIGITAL CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

45.00

Date of Receipt

09 / 22 / 2016

Transaction ID : INCA6436

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

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

1010.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 116 OF 531
(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)
WOMENCOUNT PACFull Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MASON, ZENA, , ,Mailing Address **5610 WISCONSIN AVE.**City
CHEVY CHASEState
MDZip Code
20815FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : INCA6443

Amount of Each Receipt this Period

15.00☐ Memo Item**ERMK: MAGGIE FOR NH**Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MASON, ZENA, , ,Mailing Address **5610 WISCONSIN AVE.**City
CHEVY CHASEState
MDZip Code
20815FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : INCA6437

Amount of Each Receipt this Period

15.00☐ Memo Item**ERMK: HILLARY FOR AMERICA**Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MASON, ZENA, , ,Mailing Address **5610 WISCONSIN AVE.**City
CHEVY CHASEState
MDZip Code
20815FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : INCA6438

Amount of Each Receipt this Period

15.00☐ Memo Item**ERMK: PATTY JUDGE FOR IOWA****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
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. MASON, ZENA, , ,

Mailing Address 5610 WISCONSIN AVE.

City
CHEVY CHASE

State
MD

Zip Code
20815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : INCA6439

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. MASON, ZENA, , ,

Mailing Address 5610 WISCONSIN AVE.

City
CHEVY CHASE

State
MD

Zip Code
20815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : INCA6444

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

C. MASON, ZENA, , ,

Mailing Address 5610 WISCONSIN AVE.

City
CHEVY CHASE

State
MD

Zip Code
20815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : INCA6441

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

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

45.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. MASON, ZENA, , ,

Mailing Address 5610 WISCONSIN AVE.

City
CHEVY CHASE

State
MD

Zip Code
20815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : INCA6442

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

B. MASON, ZENA, , ,

Mailing Address 5610 WISCONSIN AVE.

City
CHEVY CHASE

State
MD

Zip Code
20815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

120.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : INCA6440

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: TAMMY FOR ILLINOIS

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

C. MOORE, COURTNEY, , ,

Mailing Address 1444 VALLEJO STREET APT. 2

City
SAN FRANCISCO

State
CA

Zip Code
94109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RODAN + FIELDS

Occupation (for Individual)
VICE PRESIDENT, STRATEGY & INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5005.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : INCA6445

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

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

1030.00

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

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. HENDREN, ANNE, , ,

Mailing Address **2655 SW RAVENVIEW DRIVE**

City
PORTLAND

State
OR

Zip Code
97201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

09 / 23 / 2016

Transaction ID : INCA6435

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

Mailing Address **68-3549 AWAMOA PLACE**

City
WAIKOLOA

State
HI

Zip Code
96738

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

09 / 24 / 2016

Transaction ID : INCA6434

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

Mailing Address **68-3549 AWAMOA PLACE**

City
WAIKOLOA

State
HI

Zip Code
96738

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

09 / 24 / 2016

Transaction ID : INCA6428

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: CARROLL FOR COLORADO

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

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

15.00

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. TOEVS, LOIS, , ,

Mailing Address 68-3549 AWAMOA PLACE

City
WAIKOLOAState
HIZip Code
96738FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
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
09 / 24 / 2016

Transaction ID : INCA6433

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TADDEO FOR CONGRESS

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

B. TOEVS, LOIS, , ,

Mailing Address 68-3549 AWAMOA PLACE

City
WAIKOLOAState
HIZip Code
96738FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
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
09 / 24 / 2016

Transaction ID : INCA6429

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: VAL DEMINGS FOR CONGRESS

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

C. TOEVS, LOIS, , ,

Mailing Address 68-3549 AWAMOA PLACE

City
WAIKOLOAState
HIZip Code
96738FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
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
09 / 24 / 2016

Transaction ID : INCA6431

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: CAROL SHEA-PORTER FOR CONGRESS

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

15.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. TOEVS, LOIS, , ,

Mailing Address 68-3549 AWAMOA PLACE

City
WAIKOLOA

State
HI

Zip Code
96738

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 24 / 2016

Transaction ID : INCA6430

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: CAIN FOR CONGRESS

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

B. TOEVS, LOIS, , ,

Mailing Address 68-3549 AWAMOA PLACE

City
WAIKOLOA

State
HI

Zip Code
96738

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 24 / 2016

Transaction ID : INCA6432

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MONICA VERNON FOR CONGRESS

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

C. BARTNIK, SUZANNE, , ,

Mailing Address 101 SUSSEX COURT

City
BOSSIER CITY

State
LA

Zip Code
71111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

15.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : INCA6421

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

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

25.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. CHRISTIN, JOHN, , ,

Mailing Address 892 NEVADA AVE

City
SAN JOSE

State
CA

Zip Code
95125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PAYPAL

Occupation (for Individual)
ATTORNEY

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
09 / 26 / 2016

Transaction ID : INCA6427

Amount of Each Receipt this Period

100.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

B. GAVRIELOV, EWA, , ,

Mailing Address 1900 WEBSTER STREET

City
PALO ALTO

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : INCA6419

Amount of Each Receipt this Period

100.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

C. GAVRIELOV, EWA, , ,

Mailing Address 1900 WEBSTER STREET

City
PALO ALTO

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : INCA6420

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

300.00

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. HERRMANN, MARILLE, , ,

Mailing Address 507 LAMBERTON DR

City
SILVER SPRING

State
MD

Zip Code
20902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

09 / 26 / 2016

Transaction ID : INCA6425

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

B. HERRMANN, MARILLE, , ,

Mailing Address 507 LAMBERTON DR

City
SILVER SPRING

State
MD

Zip Code
20902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

09 / 26 / 2016

Transaction ID : INCA6424

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: FRIENDS OF ANNA THRONE-HOLST

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

C. HERRMANN, MARILLE, , ,

Mailing Address 507 LAMBERTON DR

City
SILVER SPRING

State
MD

Zip Code
20902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

40.00

Date of Receipt

09 / 26 / 2016

Transaction ID : INCA6422

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: CATHERINE CORTEZ MASTO FOR SENATE

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

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

30.00

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. HERRMANN, MARILLE, , ,

Mailing Address 507 LAMBERTON DR

City
SILVER SPRING

State
MD

Zip Code
20902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : INCA6423

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. MERCER, MICHELLE, , ,

Mailing Address 2500 STEINER STREET, #10

City
SAN FRANCISCO

State
CA

Zip Code
94115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CO-OWNER

Occupation (for Individual)

M-G VINEYARDS

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
09 / 26 / 2016

Transaction ID : INCA6426

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

C. MCNERNEY, JILLIAN, , ,

Mailing Address 501 FOREST AVE

City
PALO ALTO

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SUPERFLEX

Occupation (for Individual)

DIRECTOR OF OPERATIONS

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
09 / 27 / 2016

Transaction ID : INCA6417

Amount of Each Receipt this Period

250.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

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

1260.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. WAPNIR, IRENE, , ,

Mailing Address 773 FRENCHMANS RD

City
STANFORD

State
CA

Zip Code
94305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STANFORD

Occupation (for Individual)
SURGEON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2016

Transaction ID : INCA6418

Amount of Each Receipt this Period

50.00

☐ Memo Item

ERMK: HILLARY FOR AMERICA

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

B. SANDS, SARAH, , ,

Mailing Address 1331 HAMILTON AVE

City
PALO ALTO

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2016

Transaction ID : INCA6416

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

C. FRAHN, ANNE, , ,

Mailing Address 1125 UNIVERSITY AVENUE

City
PALO ALTO

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

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
09 / 30 / 2016

Transaction ID : INCA6410

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

1150.00

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. FRAHN, ANNE, , ,

Mailing Address 1125 UNIVERSITY AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

NOT EMPLOYED

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
09 / 30 / 2016

Transaction ID : INCA6409

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

B. HONIG, LISA, , ,

Mailing Address 320 RUTLEDGE STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

PROPERTY MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : INCA6407

Amount of Each Receipt this Period

250.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

C. HONIG, LISA, , ,

Mailing Address 320 RUTLEDGE STREET

City

SAN FRANCISCO

State

CA

Zip Code

94110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

PROPERTY MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : INCA6408

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

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

2250.00

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. LOISELLE, MINDY, , ,

Mailing Address 2215 GROVE AVE

City
RICHMOND

State
VA

Zip Code
23220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
SOCIAL WORK CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.67

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : INCA6413

Amount of Each Receipt this Period

50.00

☐ Memo Item

ERMK: DEBORAH ROSS FOR SENATE

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

B. LOISELLE, MINDY, , ,

Mailing Address 2215 GROVE AVE

City
RICHMOND

State
VA

Zip Code
23220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
SOCIAL WORK CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.67

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : INCA6412

Amount of Each Receipt this Period

50.00

☐ Memo Item

ERMK: KIRKPATRICK FOR SENATE

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

C. LOISELLE, MINDY, , ,

Mailing Address 2215 GROVE AVE

City
RICHMOND

State
VA

Zip Code
23220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
SOCIAL WORK CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

366.67

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : INCA6411

Amount of Each Receipt this Period

50.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

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

150.00

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. LOISELLE, MINDY, , ,

Mailing Address 2215 GROVE AVE

City
RICHMOND

State
VA

Zip Code
23220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
SOCIAL WORK CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.67

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2016

Transaction ID : INCA6414

Amount of Each Receipt this Period

50.00

☐ Memo Item

ERMK: MAGGIE FOR NH

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

B. LOISELLE, MINDY, , ,

Mailing Address 2215 GROVE AVE

City
RICHMOND

State
VA

Zip Code
23220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
SOCIAL WORK CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.67

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2016

Transaction ID : INCA6415

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. O'FARRELL, BRIGID, , ,

Mailing Address 1001 OCEAN BLVD

City
MOSS BEACH

State
CA

Zip Code
94038

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
SOCIOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2016

Transaction ID : INCA6406

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: KATIE MCGINTY FOR SENATE

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

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

1100.00

31626.42

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

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for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

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

A. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City
BANGOR

State
ME

Zip Code
04402

FEC ID number of contributing
federal political committee.

C C00546077

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17.65

Date of Receipt

09 / **01** / **2016**

Transaction ID : INCA6216

Amount of Each Receipt this Period

0.40

☐ Memo Item

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

B. CAROL SHEA-PORTER FOR CONGRESS

Mailing Address P.O. BOX 453

City
ROCHESTER

State
NH

Zip Code
03866

FEC ID number of contributing
federal political committee.

C C00419978

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12.40

Date of Receipt

09 / **01** / **2016**

Transaction ID : INCA6217

Amount of Each Receipt this Period

0.40

☐ Memo Item

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

C. CARROLL FOR COLORADO

Mailing Address PO BOX 470783

City
AURORA

State
CO

Zip Code
80047

FEC ID number of contributing
federal political committee.

C C00580647

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

16.80

Date of Receipt

09 / **01** / **2016**

Transaction ID : INCA6215

Amount of Each Receipt this Period

0.40

☐ Memo Item

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

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

1.20

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)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. COLLEEN DEACON FOR CONGRESS

Mailing Address 118 JULIAN PLACE#208

City
SYRACUSE

State
NY

Zip Code
13210

FEC ID number of contributing
federal political committee.

C C00588483

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15.60

Date of Receipt

09 / **01** / **2016**

Transaction ID : INCA6219

Amount of Each Receipt this Period

0.40

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGH

State
NC

Zip Code
27611

FEC ID number of contributing
federal political committee.

C C00589820

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1199.50

Date of Receipt

09 / **01** / **2016**

Transaction ID : INCA6212

Amount of Each Receipt this Period

1.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. FRIENDS OF ANNA THRONE-HOLST

Mailing Address PO BOX 6

City
SOUTHAMPTON

State
NY

Zip Code
11969

FEC ID number of contributing
federal political committee.

C C00578401

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

13.80

Date of Receipt

09 / **01** / **2016**

Transaction ID : INCA6220

Amount of Each Receipt this Period

0.40

☐ Memo Item

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

2.47

TOTAL This Period (last 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)

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORK

State
NY

Zip Code
10185

FEC ID number of contributing
federal political committee.

C C00575795

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.49

Date of Receipt

09 / **01** / **2016**

Transaction ID : INCA6208

Amount of Each Receipt this Period

0.40

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KATHERINE CLARK FOR CONGRESS

Mailing Address PO BOX 361

City
MALDEN

State
MA

Zip Code
2148

FEC ID number of contributing
federal political committee.

C C00541888

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1.60

Date of Receipt

09 / **01** / **2016**

Transaction ID : INCA6222

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIA

State
PA

Zip Code
19110

FEC ID number of contributing
federal political committee.

C C00582809

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

946.91

Date of Receipt

09 / **01** / **2016**

Transaction ID : INCA6213

Amount of Each Receipt this Period

41.67

☐ Memo Item

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

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

42.27

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

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

FOR LINE NUMBER: PAGE 132 OF 531

(check only one)

<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)

WOMENCOUNT PAC

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

A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067FEC ID number of contributing
federal political committee.

C

C00578484

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1257.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : INCA6210

Amount of Each Receipt this Period

1.67

☐ Memo Item

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

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302FEC ID number of contributing
federal political committee.

C

C00588772

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1842.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : INCA6211

Amount of Each Receipt this Period

201.67

☐ Memo Item

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

C. MONICA VERNON FOR CONGRESS

Mailing Address PO BOX 1635

City
CEDAR RAPIDSState
IAZip Code
52406FEC ID number of contributing
federal political committee.

C

C00571562

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

15.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

Transaction ID : INCA6218

Amount of Each Receipt this Period

0.40

☐ Memo Item

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

203.74

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

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINES

State
IA

Zip Code
50309

FEC ID number of contributing
federal political committee.

C C00612473

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

92.71

Date of Receipt

09 / **01** / **2016**

Transaction ID : INCA6214

Amount of Each Receipt this Period

1.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURG

State
IL

Zip Code
60159

FEC ID number of contributing
federal political committee.

C C00574889

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.26

Date of Receipt

09 / **01** / **2016**

Transaction ID : INCA6209

Amount of Each Receipt this Period

1.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. THE NIKI TSONGAS COMMITTEE

Mailing Address PO BOX 1454

City
LOWELL

State
MA

Zip Code
1853

FEC ID number of contributing
federal political committee.

C C00433136

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

0.20

Date of Receipt

09 / **01** / **2016**

Transaction ID : INCA6221

Amount of Each Receipt this Period

0.20

☐ Memo Item

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

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

3.54

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

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

A. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City
BANGOR

State
ME

Zip Code
04402

FEC ID number of contributing
federal political committee.

C C00546077

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17.65

Date of Receipt

09 / **08** / **2016**

Transaction ID : INCA7118

Amount of Each Receipt this Period

8.60

☐ Memo Item

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

B. CAROL SHEA-PORTER FOR CONGRESS

Mailing Address P.O. BOX 453

City

ROCHESTER

State

NH

Zip Code

03866

FEC ID number of contributing
federal political committee.

C C00419978

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12.40

Date of Receipt

09 / **08** / **2016**

Transaction ID : INCA7119

Amount of Each Receipt this Period

8.60

☐ Memo Item

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

C. CARROLL FOR COLORADO

Mailing Address PO BOX 470783

City

AURORA

State

CO

Zip Code

80047

FEC ID number of contributing
federal political committee.

C C00580647

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

16.80

Date of Receipt

09 / **08** / **2016**

Transaction ID : INCA7117

Amount of Each Receipt this Period

8.60

☐ Memo Item

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

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

25.80

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. COLLEEN DEACON FOR CONGRESS

Mailing Address 118 JULIAN PLACE#208

City
SYRACUSE

State
NY

Zip Code
13210

FEC ID number of contributing
federal political committee.

C

C00588483

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA7122

Amount of Each Receipt this Period

8.60

☐ Memo Item

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

B. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGH

State
NC

Zip Code
27611

FEC ID number of contributing
federal political committee.

C

C00589820

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1199.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA7114

Amount of Each Receipt this Period

41.80

☐ Memo Item

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

C. FRIENDS OF ANNA THRONE-HOLST

Mailing Address PO BOX 6

City
SOUTHAMPTON

State
NY

Zip Code
11969

FEC ID number of contributing
federal political committee.

C

C00578401

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

13.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 08 / 2016

Transaction ID : INCA7121

Amount of Each Receipt this Period

8.60

☐ Memo Item

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

59.00

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

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
 NEW YORK

State
 NY

Zip Code
 10185

FEC ID number of contributing
federal political committee.

C C00575795

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.49

Date of Receipt

09 / **08** / **2016**

Transaction ID : INCA7110

Amount of Each Receipt this Period

1.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
 PHILADELPHIA

State
 PA

Zip Code
 19110

FEC ID number of contributing
federal political committee.

C C00582809

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

946.91

Date of Receipt

09 / **08** / **2016**

Transaction ID : INCA7115

Amount of Each Receipt this Period

126.40

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
 PHOENIX

State
 AZ

Zip Code
 85067

FEC ID number of contributing
federal political committee.

C C00578484

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1257.06

Date of Receipt

09 / **08** / **2016**

Transaction ID : INCA7112

Amount of Each Receipt this Period

1.60

☐ Memo Item

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

129.20

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

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(check only one)

<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)

WOMENCOUNT PAC

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

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302FEC ID number of contributing
federal political committee.

C

C00588772

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1842.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : INCA7113

Amount of Each Receipt this Period

185.60

☐ Memo Item

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

B. MONICA VERNON FOR CONGRESS

Mailing Address PO BOX 1635

City
CEDAR RAPIDSState
IAZip Code
52406FEC ID number of contributing
federal political committee.

C

C00571562

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : INCA7120

Amount of Each Receipt this Period

8.60

☐ Memo Item

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

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309FEC ID number of contributing
federal political committee.

C

C00612473

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

92.71

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : INCA7116

Amount of Each Receipt this Period

1.80

☐ Memo Item

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

196.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 138 OF 531
(check only one)

<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)
WOMENCOUNT PACFull Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159FEC ID number of contributing
federal political committee.**C** C00574889

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Transaction ID : INCA7111

Amount of Each Receipt this Period

2.00

☐ Memo ItemFull Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City
BANGORState
MEZip Code
04402FEC ID number of contributing
federal political committee.**C** C00546077

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : INCA7131

Amount of Each Receipt this Period

0.80

☐ Memo ItemFull Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CAROL SHEA-PORTER FOR CONGRESS

Mailing Address P.O. BOX 453

City
ROCHESTERState
NHZip Code
03866FEC ID number of contributing
federal political committee.**C** C00419978

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

12.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : INCA7132

Amount of Each Receipt this Period

0.80

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

3.60

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

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

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<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)

WOMENCOUNT PAC

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

A. CARROLL FOR COLORADO

Mailing Address PO BOX 470783

City
AURORAState
COZip Code
80047FEC ID number of contributing
federal political committee.

C

C00580647

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : INCA7130

Amount of Each Receipt this Period

0.80

☐ Memo Item

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

B. COLLEEN DEACON FOR CONGRESS

Mailing Address 118 JULIAN PLACE#208

City
SYRACUSEState
NYZip Code
13210FEC ID number of contributing
federal political committee.

C

C00588483

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : INCA7135

Amount of Each Receipt this Period

0.80

☐ Memo Item

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

C. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611FEC ID number of contributing
federal political committee.

C

C00589820

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1199.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : INCA7127

Amount of Each Receipt this Period

14.56

☐ Memo Item

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)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

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

A. FRIENDS OF ANNA THRONE-HOLST

Mailing Address PO BOX 6

City
SOUTHAMPTON

State
NY

Zip Code
11969

FEC ID number of contributing
federal political committee.

C C00578401

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13.80

Date of Receipt

09 / **15** / **2016**

Transaction ID : INCA7134

Amount of Each Receipt this Period

0.80

☐ Memo Item

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

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORK

State
NY

Zip Code
10185

FEC ID number of contributing
federal political committee.

C C00575795

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.49

Date of Receipt

09 / **15** / **2016**

Transaction ID : INCA7123

Amount of Each Receipt this Period

20.16

☐ Memo Item

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

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIA

State
PA

Zip Code
19110

FEC ID number of contributing
federal political committee.

C C00582809

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

946.91

Date of Receipt

09 / **15** / **2016**

Transaction ID : INCA7128

Amount of Each Receipt this Period

14.36

☐ Memo Item

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

35.32

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

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

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)
WOMENCOUNT PAC

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

A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIX

State
AZ

Zip Code
85067

FEC ID number of contributing
federal political committee.

C C00578484

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1257.06

Date of Receipt

09 / **15** / **2016**

Transaction ID : INCA7125

Amount of Each Receipt this Period

12.96

☐ Memo Item

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

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORD

State
NH

Zip Code
03302

FEC ID number of contributing
federal political committee.

C C00588772

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1842.67

Date of Receipt

09 / **15** / **2016**

Transaction ID : INCA7126

Amount of Each Receipt this Period

162.36

☐ Memo Item

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

C. MONICA VERNON FOR CONGRESS

Mailing Address PO BOX 1635

City
CEDAR RAPIDS

State
IA

Zip Code
52406

FEC ID number of contributing
federal political committee.

C C00571562

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

15.20

Date of Receipt

09 / **15** / **2016**

Transaction ID : INCA7133

Amount of Each Receipt this Period

0.80

☐ Memo Item

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

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

176.12

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

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

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINES

State
IA

Zip Code
50309

FEC ID number of contributing
federal political committee.

C C00612473

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

92.71

Date of Receipt

09 / **15** / **2016**

Transaction ID : INCA7129

Amount of Each Receipt this Period

14.56

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURG

State
IL

Zip Code
60159

FEC ID number of contributing
federal political committee.

C C00574889

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.26

Date of Receipt

09 / **15** / **2016**

Transaction ID : INCA7124

Amount of Each Receipt this Period

14.36

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CATHERINE CORTEZ MASTO FOR SENATE

Mailing Address 8020 SOUTH RAINBOW BLVD. SUITE 100

City
LAS VEGAS

State
NV

Zip Code
89139

FEC ID number of contributing
federal political committee.

C C00575548

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

770.45

Date of Receipt

09 / **22** / **2016**

Transaction ID : INCA7143

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

38.92

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 531

(check only one)

<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)

WOMENCOUNT PAC

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

A. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611FEC ID number of contributing
federal political committee.

C

C00589820

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1199.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : INCA7140

Amount of Each Receipt this Period

55.83

☐ Memo Item

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

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185FEC ID number of contributing
federal political committee.

C

C00575795

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : INCA7136

Amount of Each Receipt this Period

5.63

☐ Memo Item

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

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110FEC ID number of contributing
federal political committee.

C

C00582809

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

946.91

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : INCA7141

Amount of Each Receipt this Period

176.23

☐ Memo Item

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

237.69

TOTAL This Period (last 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)

<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)

WOMENCOUNT PAC

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

A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067FEC ID number of contributing
federal political committee.

C

C00578484

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1257.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : INCA7138

Amount of Each Receipt this Period

15.83

☐ Memo Item

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

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302FEC ID number of contributing
federal political committee.

C

C00588772

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1842.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : INCA7139

Amount of Each Receipt this Period

26.83

☐ Memo Item

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

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309FEC ID number of contributing
federal political committee.

C

C00612473

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

92.71

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : INCA7142

Amount of Each Receipt this Period

7.83

☐ Memo Item

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

50.49

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

WOMENCOUNT PAC

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

A. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159FEC ID number of contributing
federal political committee.**C** C00574889

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : INCA7137

Amount of Each Receipt this Period

16.63

☐ Memo Item

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

B. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City
BANGORState
MEZip Code
04402FEC ID number of contributing
federal political committee.**C** C00546077

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

17.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : INCA7153

Amount of Each Receipt this Period

0.20

☐ Memo Item

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

C. CAROL SHEA-PORTER FOR CONGRESS

Mailing Address P.O. BOX 453

City
ROCHESTERState
NHZip Code
03866FEC ID number of contributing
federal political committee.**C** C00419978

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

12.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : INCA7154

Amount of Each Receipt this Period

0.20

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

17.03

TOTAL This Period (last 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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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

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

A. CARROLL FOR COLORADO

Mailing Address PO BOX 470783

City
AURORA

State
CO

Zip Code
80047

FEC ID number of contributing
federal political committee.

C C00580647

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16.80

Date of Receipt

09 / **29** / **2016**

Transaction ID : INCA7151

Amount of Each Receipt this Period

0.20

☐ Memo Item

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

B. CATHERINE CORTEZ MASTO FOR SENATE

Mailing Address 8020 SOUTH RAINBOW BLVD. SUITE 100

City

LAS VEGAS

State

NV

Zip Code

89139

FEC ID number of contributing
federal political committee.

C C00575548

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.45

Date of Receipt

09 / **29** / **2016**

Transaction ID : INCA7157

Amount of Each Receipt this Period

0.40

☐ Memo Item

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

C. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City

RALEIGH

State

NC

Zip Code

27611

FEC ID number of contributing
federal political committee.

C C00589820

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1199.50

Date of Receipt

09 / **29** / **2016**

Transaction ID : INCA7148

Amount of Each Receipt this Period

0.60

☐ Memo Item

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

1.20

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

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(check only one)

<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)

WOMENCOUNT PAC

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

A. FRIENDS OF ANNA THRONE-HOLST

Mailing Address PO BOX 6

City
SOUTHAMPTON

State
NY

Zip Code
11969

FEC ID number of contributing
federal political committee.

C

C00578401

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2016

Transaction ID : INCA7158

Amount of Each Receipt this Period

0.40

☐ Memo Item

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

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORK

State
NY

Zip Code
10185

FEC ID number of contributing
federal political committee.

C

C00575795

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.49

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2016

Transaction ID : INCA7144

Amount of Each Receipt this Period

11.60

☐ Memo Item

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

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIA

State
PA

Zip Code
19110

FEC ID number of contributing
federal political committee.

C

C00582809

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

946.91

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2016

Transaction ID : INCA7149

Amount of Each Receipt this Period

91.00

☐ Memo Item

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

103.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIX

State
AZ

Zip Code
85067

FEC ID number of contributing
federal political committee.

C C00578484

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1257.06

Date of Receipt

09 / **29** / **2016**

Transaction ID : INCA7146

Amount of Each Receipt this Period

0.60

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORD

State
NH

Zip Code
03302

FEC ID number of contributing
federal political committee.

C C00588772

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1842.67

Date of Receipt

09 / **29** / **2016**

Transaction ID : INCA7147

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. MONICA VERNON FOR CONGRESS

Mailing Address PO BOX 1635

City
CEDAR RAPIDS

State
IA

Zip Code
52406

FEC ID number of contributing
federal political committee.

C C00571562

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

15.20

Date of Receipt

09 / **29** / **2016**

Transaction ID : INCA7155

Amount of Each Receipt this Period

0.20

☐ Memo Item

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

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

1.80

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINES

State
IA

Zip Code
50309

FEC ID number of contributing
federal political committee.

C C00612473

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

92.71

Date of Receipt

09 / **29** / **2016**

Transaction ID : INCA7150

Amount of Each Receipt this Period

0.60

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. TADDEO FOR CONGRESS

Mailing Address PO BOX 432094

City

PO BOX 432094

State

FL

Zip Code

33243

FEC ID number of contributing
federal political committee.

C C00445163

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4.90

Date of Receipt

09 / **29** / **2016**

Transaction ID : INCA7156

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City

SCHAUMBURG

State

IL

Zip Code

60159

FEC ID number of contributing
federal political committee.

C C00574889

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1160.26

Date of Receipt

09 / **29** / **2016**

Transaction ID : INCA7145

Amount of Each Receipt this Period

0.60

☐ Memo Item

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

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

1.40

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

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

FOR LINE NUMBER: PAGE 150 OF 531

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. VAL DEMINGS FOR CONGRESS

Mailing Address PO BOX 536926

City
 ORLAND

State
 FL

Zip Code
 32853

FEC ID number of contributing
federal political committee.

C C00590489

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 29 / 2016

Transaction ID : INCA7152

Amount of Each Receipt this Period

0.20

☐ Memo Item

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

0.20

1346.15

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

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

FOR LINE NUMBER: PAGE 151 OF 531

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
 CONCORD

State
 NH

Zip Code
 03302

FEC ID number of contributing
federal political committee.

C C00588772

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1842.67

Date of Receipt

09 / **15** / **2016**

Transaction ID : INCA7167

Amount of Each Receipt this Period

1000.00

☐ Memo Item

REFUNDED CONTRIBUTION: ERMK: MICHELLE
MERCER

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

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

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

1000.00

1000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 152 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City
SAN FRANCISCOState
CAZip Code
94128Purpose of Disbursement
ACCOUNT FEE

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB6373

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST DATAMailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000City
ATLANTAState
GAZip Code
30342Purpose of Disbursement
CREDIT CARD PROCESSING FEES

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB6274

Amount of Each Disbursement this Period

187.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST DATAMailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000City
ATLANTAState
GAZip Code
30342Purpose of Disbursement
CREDIT CARD PROCESSING FEES

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB6272

Amount of Each Disbursement this Period

40.79

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

253.77

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 153 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. FIRST DATAMailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000City
ATLANTAState
GAZip Code
30342Purpose of Disbursement
CREDIT CARD PROCESSING FEES

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB6273

Amount of Each Disbursement this Period

807.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HARVEY, MEGHAN, , ,

Mailing Address 5425 CHARLOTTE WAY

City
LIVERMOREState
CAZip Code
94550Purpose of Disbursement
SOCIAL MEDIA COMMUNICATIONS

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB6399

Amount of Each Disbursement this Period

437.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WELLS FARGO BANK

Mailing Address 464 CALIFORNIA STREET

City
SAN FRANCISCOState
CAZip Code
94163Purpose of Disbursement
BANK FEE

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB7164

Amount of Each Disbursement this Period

56.97

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1301.89

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 154 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DELUXE

Mailing Address 3680 VICTORIA STREET NORTH

City
SHOREVIEWState
MNZip Code
55126-2966Purpose of Disbursement
CHECKS

001

Category/
Type

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
0	9			2	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : EXPB7163

Amount of Each Disbursement this Period

366.36

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

366.36

1922.02

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 155 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City
BANGORState
MEZip Code
04402Purpose of Disbursement
ERMK: DONNA HOOP

Candidate Name

CAIN, EMILY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: ME

District: 02

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

FEC Identification Number

C C00546077**Transaction ID : EXPB6074**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City
BANGORState
MEZip Code
04402Purpose of Disbursement
ERMK: GLORIA J HOWARD

Candidate Name

CAIN, EMILY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: ME

District: 02

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

FEC Identification Number

C C00546077**Transaction ID : EXPB6081**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAROL SHEA-PORTER FOR CONGRESS

Mailing Address P.O. BOX 453

City
ROCHESTERState
NHZip Code
03866Purpose of Disbursement
ERMK: DONNA HOOP

Candidate Name

PORTER, CAROL SHEA, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District: 01

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

FEC Identification Number

C C00419978**Transaction ID : EXPB6075**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

15.00

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

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6074

ERMK: DONNA HOOP-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6081

ERMK: GLORIA J HOWARD-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6075

ERMK: DONNA HOOP-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 158 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. CAROL SHEA-PORTER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2016

Mailing Address P.O. BOX 453

City
ROCHESTERState
NHZip Code
03866Purpose of Disbursement
ERMK: GLORIA J HOWARD

Candidate Name

PORTER, CAROL SHEA, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District: 01

Category/
Type

FEC Identification Number

C C00419978**Transaction ID : EXPB6082**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CARROLL FOR COLORADO

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2016

Mailing Address PO BOX 470783

City
AURORAState
COZip Code
80047Purpose of Disbursement
ERMK: DONNA HOOP

Candidate Name

CARROLL, MORGAN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: CO

District: 06

Category/
Type

FEC Identification Number

C C00580647**Transaction ID : EXPB6073**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CARROLL FOR COLORADO

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2016

Mailing Address PO BOX 470783

City
AURORAState
COZip Code
80047Purpose of Disbursement
ERMK: GLORIA J HOWARD

Candidate Name

CARROLL, MORGAN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: CO

District: 06

Category/
Type

FEC Identification Number

C C00580647**Transaction ID : EXPB6080**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6082

ERMK: GLORIA J HOWARD-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6073

ERMK: DONNA HOOP-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6080

ERMK: GLORIA J HOWARD-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 161 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. COLLEEN DEACON FOR CONGRESS

Mailing Address 118 JULIAN PLACE#208

City
SYRACUSEState
NYZip Code
13210Purpose of Disbursement
ERMK: DONNA HOOP

Candidate Name

DEACON, COLLEEN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 24

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00588483**Transaction ID : EXPB6077**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. COLLEEN DEACON FOR CONGRESS

Mailing Address 118 JULIAN PLACE#208

City
SYRACUSEState
NYZip Code
13210Purpose of Disbursement
ERMK: GLORIA J HOWARD

Candidate Name

DEACON, COLLEEN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 24

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00588483**Transaction ID : EXPB6084**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: MINDY LOISELLE

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB6070**

Amount of Each Disbursement this Period

16.67

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

26.67

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6077

ERMK: DONNA HOOP-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6084

ERMK: GLORIA J HOWARD-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6070

ERMK: MINDY LOISELLE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: GERI DESIMONE

Candidate Name

ROSS, DEBORAH, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: NC District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB6095**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF ANNA THRONE-HOLST

Mailing Address PO BOX 6

City
SOUTHAMPTONState
NYZip Code
11969Purpose of Disbursement
ERMK: DONNA HOOP

Candidate Name

THRONE-HOLST, ANNA, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00578401**Transaction ID : EXPB6078**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF ANNA THRONE-HOLST

Mailing Address PO BOX 6

City
SOUTHAMPTONState
NYZip Code
11969Purpose of Disbursement
ERMK: GLORIA J HOWARD

Candidate Name

THRONE-HOLST, ANNA, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00578401**Transaction ID : EXPB6085**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6095

ERMK: GERI DESIMONE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6078

ERMK: DONNA HOOP-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6085

ERMK: GLORIA J HOWARD-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: DONNA HOOP

Candidate Name

CLINTON, HILLARY RODHAM, , ,

Office Sought:

☐ House☐ Senate☒ President

State:

District:

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

FEC Identification Number

C C00575795**Transaction ID : EXPB6079**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: MEGAN CLAYTON

Candidate Name

CLINTON, HILLARY RODHAM, , ,

Office Sought:

☐ House☐ Senate☒ President

State:

District:

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

FEC Identification Number

C C00575795**Transaction ID : EXPB6090**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATHERINE CLARK FOR CONGRESS

Mailing Address PO BOX 361

City
MALDENState
MAZip Code
2148Purpose of Disbursement
ERMK: MEGAN CLAYTON

Candidate Name

CLARK, KATHERINE, , ,

Office Sought:

☒ House☐ Senate☐ President

State: MA

District: 05

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

FEC Identification Number

C C00541888**Transaction ID : EXPB6089**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6079

ERMK: DONNA HOOP-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6090

ERMK: MEGAN CLAYTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6089

ERMK: MEGAN CLAYTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: MINDY LOISELLE

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6068**

Amount of Each Disbursement this Period

16.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: GERI DESIMONE

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6093**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: LISA DIAZ NASH

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6097**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1041.67

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6068

ERMK: MINDY LOISELLE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6093

ERMK: GERI DESIMONE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6097

ERMK: LISA DIAZ NASH-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: MINDY LOISELLE

Candidate Name

KIRKPATRICK, ANN, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6066**

Amount of Each Disbursement this Period

16.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: GERI DESIMONE

Candidate Name

KIRKPATRICK, ANN, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6094**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: MINDY LOISELLE

Candidate Name

HASSAN, MAGGIE, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6069**

Amount of Each Disbursement this Period

16.67

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

58.34

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6066

ERMK: MINDY LOISELLE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6094

ERMK: GERI DESIMONE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6069

ERMK: MINDY LOISELLE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: SIMONE COXE

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6072**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: DOROTHY GEOGHEGAN

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6086**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: MICHELLE MERCER

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6087**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6072

ERMK: SIMONE COXE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6086

ERMK: DOROTHY GEOGHEGAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6087

ERMK: MICHELLE MERCER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: GERI DESIMONE

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6096**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: LISA DIAZ NASH

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6098**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: BARBARA GRASSESCHI

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6099**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2	0	2	5	.	0	0
---	---	---	---	---	---	---

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6096

ERMK: GERI DESIMONE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6098

ERMK: LISA DIAZ NASH-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6099

ERMK: BARBARA GRASSESCHI-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MONICA VERNON FOR CONGRESS

Mailing Address PO BOX 1635

City
CEDAR RAPIDSState
IAZip Code
52406Purpose of Disbursement
ERMK: DONNA HOOP

Candidate Name

VERNON, MONICA, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District: 01

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00571562**Transaction ID : EXPB6076**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MONICA VERNON FOR CONGRESS

Mailing Address PO BOX 1635

City
CEDAR RAPIDSState
IAZip Code
52406Purpose of Disbursement
ERMK: GLORIA J HOWARD

Candidate Name

VERNON, MONICA, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District: 01

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00571562**Transaction ID : EXPB6083**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: MINDY LOISELLE

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	1			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB6071**

Amount of Each Disbursement this Period

16.65

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

26.65

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6076

ERMK: DONNA HOOP-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6083

ERMK: GLORIA J HOWARD-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6071

ERMK: MINDY LOISELLE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: GERI DESIMONE

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB6092**

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: MINDY LOISELLE

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

FEC Identification Number

C C00574889**Transaction ID : EXPB6067**

Amount of Each Disbursement this Period

16.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: ELIZABETH JENKINS-JOFFE

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2016

FEC Identification Number

C C00574889**Transaction ID : EXPB6091**

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

66.67

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6092

ERMK: GERI DESIMONE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6067

ERMK: MINDY LOISELLE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6091

ERMK: ELIZABETH JENKINS-JOFFE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. THE NIKI TSONGAS COMMITTEE

Mailing Address PO BOX 1454

City
LOWELLState
MAZip Code
1853Purpose of Disbursement
ERMK: MEGAN CLAYTON

Candidate Name

TSONGAS, NIKI, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 03

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2016

FEC Identification Number

C C00433136**Transaction ID : EXPB6088**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City
BANGORState
MEZip Code
04402Purpose of Disbursement
ERMK: MARCIA ADDY

Candidate Name

CAIN, EMILY, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: ME District: 02

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2016

FEC Identification Number

C C00546077**Transaction ID : EXPB7085**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City
BANGORState
MEZip Code
04402Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

CAIN, EMILY, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: ME District: 02

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2016

FEC Identification Number

C C00546077**Transaction ID : EXPB7097**

Amount of Each Disbursement this Period

200.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

210.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6088

ERMK: MEGAN CLAYTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7085

ERMK: MARCIA ADDY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7097

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City
BANGORState
MEZip Code
04402Purpose of Disbursement
ERMK: IRENE WAPNIR

Candidate Name

CAIN, EMILY, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: ME District: 02

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

FEC Identification Number

C C00546077**Transaction ID : EXPB7104**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAROL SHEA-PORTER FOR CONGRESS

Mailing Address P.O. BOX 453

City
ROCHESTERState
NHZip Code
03866Purpose of Disbursement
ERMK: MARCIA ADDY

Candidate Name

PORTER, CAROL SHEA, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District: 01

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

FEC Identification Number

C C00419978**Transaction ID : EXPB7086**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAROL SHEA-PORTER FOR CONGRESS

Mailing Address P.O. BOX 453

City
ROCHESTERState
NHZip Code
03866Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

PORTER, CAROL SHEA, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District: 01

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

FEC Identification Number

C C00419978**Transaction ID : EXPB7098**

Amount of Each Disbursement this Period

200.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

215.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7104

ERMK: IRENE WAPNIR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7086

ERMK: MARCIA ADDY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7098

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 194 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. CAROL SHEA-PORTER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2016

Mailing Address P.O. BOX 453

City
ROCHESTERState
NHZip Code
03866Purpose of Disbursement
ERMK: IRENE WAPNIR

Candidate Name

PORTER, CAROL SHEA, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District: 01

Category/
Type

FEC Identification Number

C C00419978**Transaction ID : EXPB7105**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CARROLL FOR COLORADO

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2016

Mailing Address PO BOX 470783

City
AURORAState
COZip Code
80047Purpose of Disbursement
ERMK: MARCIA ADDY

Candidate Name

CARROLL, MORGAN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: CO

District: 06

Category/
Type

FEC Identification Number

C C00580647**Transaction ID : EXPB7084**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CARROLL FOR COLORADO

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2016

Mailing Address PO BOX 470783

City
AURORAState
COZip Code
80047Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

CARROLL, MORGAN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: CO

District: 06

Category/
Type

FEC Identification Number

C C00580647**Transaction ID : EXPB7096**

Amount of Each Disbursement this Period

200.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

215.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7105

ERMK: IRENE WAPNIR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7084

ERMK: MARCIA ADDY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7096

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 197 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. CARROLL FOR COLORADO

Mailing Address PO BOX 470783

City
AURORAState
COZip Code
80047Purpose of Disbursement
ERMK: IRENE WAPNIR

Candidate Name

CARROLL, MORGAN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: CO

District: 06

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00580647**Transaction ID : EXPB7103**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. COLLEEN DEACON FOR CONGRESS

Mailing Address 118 JULIAN PLACE#208

City
SYRACUSEState
NYZip Code
13210Purpose of Disbursement
ERMK: MARCIA ADDY

Candidate Name

DEACON, COLLEEN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 24

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00588483**Transaction ID : EXPB7088**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. COLLEEN DEACON FOR CONGRESS

Mailing Address 118 JULIAN PLACE#208

City
SYRACUSEState
NYZip Code
13210Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

DEACON, COLLEEN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 24

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00588483**Transaction ID : EXPB7100**

Amount of Each Disbursement this Period

200.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

215.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7103

ERMK: IRENE WAPNIR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7088

ERMK: MARCIA ADDY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7100

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. COLLEEN DEACON FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Mailing Address 118 JULIAN PLACE#208

City
SYRACUSEState
NYZip Code
13210Purpose of Disbursement
ERMK: IRENE WAPNIR

Candidate Name

DEACON, COLLEEN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 24

Category/
Type

FEC Identification Number

C C00588483**Transaction ID : EXPB7107**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEBORAH ROSS FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: JUDITH DOLAN

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

FEC Identification Number

C C00589820**Transaction ID : EXPB7043**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEBORAH ROSS FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: MAIDA TAYLOR

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

FEC Identification Number

C C00589820**Transaction ID : EXPB7054**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7107

ERMK: IRENE WAPNIR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7043

ERMK: JUDITH DOLAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7054

ERMK: MAIDA TAYLOR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 203 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: ANNE HENDREN

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB7063**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: JILLIAN DEL POZO

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB7069**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: NORMA SHULMAN

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB7074**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

20.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7063

ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7069

ERMK: JILLIAN DEL POZO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7074

ERMK: NORMA SHULMAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 206 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: FLORENCE GASKILL

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

FEC Identification Number

C C00589820**Transaction ID : EXPB7091**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEBORAH ROSS FOR SENATE

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: SIMONE COXE

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

FEC Identification Number

C C00589820**Transaction ID : EXPB7102**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF ANNA THRONE-HOLST

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

Mailing Address PO BOX 6

City
SOUTHAMPTONState
NYZip Code
11969Purpose of Disbursement
ERMK: MARCIA ADDY

Candidate Name

THRONE-HOLST, ANNA, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 01

Category/
Type

FEC Identification Number

C C00578401**Transaction ID : EXPB7089**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1010.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7091

ERMK: FLORENCE GASKILL-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7102

ERMK: SIMONE COXE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7089

ERMK: MARCIA ADDY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 209 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF ANNA THRONE-HOLST

Mailing Address PO BOX 6

City
SOUTHAMPTONState
NYZip Code
11969Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

THRONE-HOLST, ANNA, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00578401**Transaction ID : EXPB7101**

Amount of Each Disbursement this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF ANNA THRONE-HOLST

Mailing Address PO BOX 6

City
SOUTHAMPTONState
NYZip Code
11969Purpose of Disbursement
ERMK: IRENE WAPNIR

Candidate Name

THRONE-HOLST, ANNA, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00578401**Transaction ID : EXPB7108**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: JUDITH DOLAN

Candidate Name

CLINTON, HILLARY RODHAM, , ,

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
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB7047**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

220.00

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

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7101

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7108

ERMK: IRENE WAPNIR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7047

ERMK: JUDITH DOLAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 212 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: JACQUELINE APEL

Candidate Name

CLINTON, HILLARY RODHAM, , ,

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
09		08		2016

FEC Identification Number

C C00575795**Transaction ID : EXPB7051**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: MAIDA TAYLOR

Candidate Name

CLINTON, HILLARY RODHAM, , ,

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
09		08		2016

FEC Identification Number

C C00575795**Transaction ID : EXPB7058**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: ANNE HENDREN

Candidate Name

CLINTON, HILLARY RODHAM, , ,

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
09		08		2016

FEC Identification Number

C C00575795**Transaction ID : EXPB7067**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

20.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7051

ERMK: JACQUELINE APEL-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7058

ERMK: MAIDA TAYLOR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7067

ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 215 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: JUDITH DOLAN

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7044**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: JACQUELINE APEL

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7049**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: MAIDA TAYLOR

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7055**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

25.00

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

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7044

ERMK: JUDITH DOLAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7049

ERMK: JACQUELINE APEL-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7055

ERMK: MAIDA TAYLOR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 218 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: ANNE HENDREN

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7064**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: JILLIAN DEL POZO

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7070**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: NORMA SHULMAN

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7075**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7064

ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7070

ERMK: JILLIAN DEL POZO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7075

ERMK: NORMA SHULMAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: LARRY BIRENBAUM

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7079**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: ALEXANDRA ACKER-LYONS

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7080**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: MIMI FELDMAN

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7083**

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1110.00

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

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7079

ERMK: LARRY BIRENBAUM-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7080

ERMK: ALEXANDRA ACKER-LYONS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7083

ERMK: MIMI FELDMAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 224 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: FLORENCE GASKILL

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7092**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: JENNIFER WILSON

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7094**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: DOROTHY GEOGHEGAN

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7095**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2005.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7092

ERMK: FLORENCE GASKILL-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7094

ERMK: JENNIFER WILSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7095

ERMK: DOROTHY GEOGHEGAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: JUDITH DOLAN

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

FEC Identification Number

C C00578484**Transaction ID : EXPB7046**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: MAIDA TAYLOR

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

FEC Identification Number

C C00578484**Transaction ID : EXPB7057**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: JILLIAN DEL POZO

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

FEC Identification Number

C C00578484**Transaction ID : EXPB7060**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7046

ERMK: JUDITH DOLAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7057

ERMK: MAIDA TAYLOR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7060

ERMK: JILLIAN DEL POZO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 230 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: ANNE HENDREN

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB7066**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: NORMA SHULMAN

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB7077**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: JUDITH DOLAN

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB7042**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

20.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7066

ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7077

ERMK: NORMA SHULMAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7042

ERMK: JUDITH DOLAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 233 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: MAIDA TAYLOR

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB7053**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: ANNE HENDREN

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB7062**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: JILLIAN DEL POZO

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB7068**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7053

ERMK: MAIDA TAYLOR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7062

ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7068

ERMK: JILLIAN DEL POZO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 236 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: NORMA SHULMAN

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB7073**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: DIANE ZACK

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB7078**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: LARRY BIRENBAUM

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB7081**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2005.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7073

ERMK: NORMA SHULMAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7078

ERMK: DIANE ZACK-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7081

ERMK: LARRY BIRENBAUM-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: MIMI FELDMAN

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB7082**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: HEATHER WILSON

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB7093**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: AMY PEARL

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB7109**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1600.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7082

ERMK: MIMI FELDMAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7093

ERMK: HEATHER WILSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7109

ERMK: AMY PEARL-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: BETSY COTTON

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB7165**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MONICA VERNON FOR CONGRESS

Mailing Address PO BOX 1635

City
CEDAR RAPIDSState
IAZip Code
52406Purpose of Disbursement
ERMK: MARCIA ADDY

Candidate Name

VERNON, MONICA, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00571562**Transaction ID : EXPB7087**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MONICA VERNON FOR CONGRESS

Mailing Address PO BOX 1635

City
CEDAR RAPIDSState
IAZip Code
52406Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

VERNON, MONICA, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00571562**Transaction ID : EXPB7099**

Amount of Each Disbursement this Period

200.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1205.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7165

ERMK: BETSY COTTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7087

ERMK: MARCIA ADDY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7099

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 245 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MONICA VERNON FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2016

Mailing Address PO BOX 1635

City
CEDAR RAPIDSState
IAZip Code
52406Purpose of Disbursement
ERMK: IRENE WAPNIR

Candidate Name

VERNON, MONICA, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District: 01

Category/
Type

FEC Identification Number

C C00571562**Transaction ID : EXPB7106**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2016

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: JUDITH DOLAN

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

FEC Identification Number

C C00612473**Transaction ID : EXPB7045**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY JUDGE FOR IOWA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2016

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: JACQUELINE APEL

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

FEC Identification Number

C C00612473**Transaction ID : EXPB7050**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7106

ERMK: IRENE WAPNIR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7045

ERMK: JUDITH DOLAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7050

ERMK: JACQUELINE APEL-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: MAIDA TAYLOR

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB7056**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: ANNE HENDREN

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB7065**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: JILLIAN DEL POZO

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB7071**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

25.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7056

ERMK: MAIDA TAYLOR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7065

ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7071

ERMK: JILLIAN DEL POZO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 251 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: NORMA SHULMAN

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB7076**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: JUDITH DOLAN

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB7041**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: JACQUELINE APEL

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB7048**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2	0	0	0
---	---	---	---

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7076

ERMK: NORMA SHULMAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7041

ERMK: JUDITH DOLAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7048

ERMK: JACQUELINE APEL-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 254 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: MAIDA TAYLOR

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB7052**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: JILLIAN DEL POZO

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB7059**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: ANNE HENDREN

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB7061**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7052

ERMK: MAIDA TAYLOR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7059

ERMK: JILLIAN DEL POZO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7061

ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 257 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: NORMA SHULMAN

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB7072**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: FLORENCE GASKILL

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	8			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB7090**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City
BANGORState
MEZip Code
04402Purpose of Disbursement
ERMK: THERESA RADER-WILSON

Candidate Name

CAIN, EMILY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: ME

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00546077**Transaction ID : EXPB6947**

Amount of Each Disbursement this Period

20.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7072

ERMK: NORMA SHULMAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7090

ERMK: FLORENCE GASKILL-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6947

ERMK: THERESA RADER-WILSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. CAROL SHEA-PORTER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2016

Mailing Address P.O. BOX 453

City
ROCHESTERState
NHZip Code
03866Purpose of Disbursement
ERMK: THERESA RADER-WILSON

Candidate Name

PORTER, CAROL SHEA, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District: 01

Category/
Type

FEC Identification Number

C C00419978**Transaction ID : EXPB6945**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CARROLL FOR COLORADO

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2016

Mailing Address PO BOX 470783

City
AURORAState
COZip Code
80047Purpose of Disbursement
ERMK: THERESA RADER-WILSON

Candidate Name

CARROLL, MORGAN, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 06

Category/
Type

FEC Identification Number

C C00580647**Transaction ID : EXPB6946**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. COLLEEN DEACON FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2016

Mailing Address 118 JULIAN PLACE#208

City
SYRACUSEState
NYZip Code
13210Purpose of Disbursement
ERMK: THERESA RADER-WILSON

Candidate Name

DEACON, COLLEEN, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 24

Category/
Type

FEC Identification Number

C C00588483**Transaction ID : EXPB6943**

Amount of Each Disbursement this Period

20.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

60.00

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

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6945

ERMK: THERESA RADER-WILSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6946

ERMK: THERESA RADER-WILSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6943

ERMK: THERESA RADER-WILSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C C00589820**Transaction ID : EXPB6932**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: JANE HARPER

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C C00589820**Transaction ID : EXPB6939**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: SUSAN KAY

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C C00589820**Transaction ID : EXPB6953**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

115.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6932

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6939

ERMK: JANE HARPER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6953

ERMK: SUSAN KAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: ANNE HENDREN

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB6960**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: KAY KHAN

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB6967**

Amount of Each Disbursement this Period

35.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: MELISSA JOHNSTON

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB6974**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.71

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6960

ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6967

ERMK: KAY KHAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6974

ERMK: MELISSA JOHNSTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: NAN KANE

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB6977**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: BRENDA WILLETT

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB6983**

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: SUSAN SANDS

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB6989**

Amount of Each Disbursement this Period

7.14

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

47.14

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6977

ERMK: NAN KANE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6983

ERMK: BRENDA WILLETT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6989

ERMK: SUSAN SANDS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: BEVERLY HANSON

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB6996**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: REBECCA MURRAY

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB7004**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: CRIS SELIN

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB7011**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

20.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6996

ERMK: BEVERLY HANSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7004

ERMK: REBECCA MURRAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7011

ERMK: CRIS SELIN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: JULIA ARRINGTON, PH.D.

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB7018**

Amount of Each Disbursement this Period

28.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: MAUREEN C KENNY

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB7025**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: BIERTA BARFOD

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB7032**

Amount of Each Disbursement this Period

87.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

121.07

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7018

ERMK: JULIA ARRINGTON, PH.D.-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7025

ERMK: MAUREEN C KENNY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7032

ERMK: BIERTA BARFOD-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: STACY MASON

Candidate Name

ROSS, DEBORAH, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: NC District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB7039**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF ANNA THRONE-HOLST

Mailing Address PO BOX 6

City
SOUTHAMPTONState
NYZip Code
11969Purpose of Disbursement
ERMK: THERESA RADER-WILSON

Candidate Name

THRONE-HOLST, ANNA, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00578401**Transaction ID : EXPB6942**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB6933**

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

130.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7039

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6942

ERMK: THERESA RADER-WILSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6933

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: JANE HARPER

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	15	/	2016

FEC Identification Number

C C00575795**Transaction ID : EXPB6940**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: THERESA RADER-WILSON

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	15	/	2016

FEC Identification Number

C C00575795**Transaction ID : EXPB6941**

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: SUSAN KAY

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	15	/	2016

FEC Identification Number

C C00575795**Transaction ID : EXPB6954**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

165.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6940

ERMK: JANE HARPER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6941

ERMK: THERESA RADER-WILSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6954

ERMK: SUSAN KAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: ANNE HENDREN

Candidate Name

CLINTON, HILLARY RODHAM, , ,

Office Sought:

☐ House☐ Senate☒ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB6961**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: KAY KHAN

Candidate Name

CLINTON, HILLARY RODHAM, , ,

Office Sought:

☐ House☐ Senate☒ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB6968**

Amount of Each Disbursement this Period

35.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: MELISSA JOHNSTON

Candidate Name

CLINTON, HILLARY RODHAM, , ,

Office Sought:

☐ House☐ Senate☒ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB6975**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

50.74

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6961

ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6968

ERMK: KAY KHAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6975

ERMK: MELISSA JOHNSTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: NAN KANE

Candidate Name

CLINTON, HILLARY RODHAM, , ,

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
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB6978**

Amount of Each Disbursement this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: SUSAN SANDS

Candidate Name

CLINTON, HILLARY RODHAM, , ,

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
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB6990**

Amount of Each Disbursement this Period

7.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: BEVERLY HANSON

Candidate Name

CLINTON, HILLARY RODHAM, , ,

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
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB6997**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

57.16

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6978

ERMK: NAN KANE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6990

ERMK: SUSAN SANDS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6997

ERMK: BEVERLY HANSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: REBECCA MURRAY

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB7005**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: CRIS SELIN

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB7012**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: JULIA ARRINGTON, PH.D.

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB7019**

Amount of Each Disbursement this Period

28.58

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.58

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7005

ERMK: REBECCA MURRAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7012

ERMK: CRIS SELIN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7019

ERMK: JULIA ARRINGTON, PH.D.-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: MAUREEN C KENNY

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB7026**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: BIERTA BARFOD

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB7033**

Amount of Each Disbursement this Period

87.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: PA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6930**

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

192.50

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7026

ERMK: MAUREEN C KENNY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7033

ERMK: BIERTA BARFOD-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6930

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: JANE HARPER

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6937**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: SUSAN KAY

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6951**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: ANNE HENDREN

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6958**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6937

ERMK: JANE HARPER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6951

ERMK: SUSAN KAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6958

ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 299 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: KAY KHAN

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6965**

Amount of Each Disbursement this Period

35.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: MELISSA JOHNSTON

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6972**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: BRENDA WILLETT

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6982**

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

80.71

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

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6965

ERMK: KAY KHAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6972

ERMK: MELISSA JOHNSTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6982

ERMK: BRENDA WILLETT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 302 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: SUSAN SANDS

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6987**

Amount of Each Disbursement this Period

7.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: BEVERLY HANSON

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6994**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: REBECCA MURRAY

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7002**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

22.14

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6987

ERMK: SUSAN SANDS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6994

ERMK: BEVERLY HANSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7002

ERMK: REBECCA MURRAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 305 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: CRIS SELIN

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7009**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: JULIA ARRINGTON, PH.D.

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7016**

Amount of Each Disbursement this Period

28.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: MAUREEN C KENNY

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7023**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.57

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7009

ERMK: CRIS SELIN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7016

ERMK: JULIA ARRINGTON, PH.D.-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7023

ERMK: MAUREEN C KENNY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 308 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: BIERTA BARFOD

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7030**

Amount of Each Disbursement this Period

87.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: STACY MASON

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB7037**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6931**

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

197.50

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7030

ERMK: BIERTA BARFOD-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7037

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6931

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 311 OF 531

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

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: JANE HARPER

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6938**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: SUSAN KAY

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6952**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: ANNE HENDREN

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6959**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6938

ERMK: JANE HARPER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6952

ERMK: SUSAN KAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6959

ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 314 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: KAY KHAN

Candidate Name

KIRKPATRICK, ANN, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6966**

Amount of Each Disbursement this Period

35.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: MELISSA JOHNSTON

Candidate Name

KIRKPATRICK, ANN, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6973**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: SUSAN SANDS

Candidate Name

KIRKPATRICK, ANN, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6988**

Amount of Each Disbursement this Period

7.14

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

52.85

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6966

ERMK: KAY KHAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6973

ERMK: MELISSA JOHNSTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6988

ERMK: SUSAN SANDS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: BEVERLY HANSON

Candidate Name

KIRKPATRICK, ANN, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6995**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: REBECCA MURRAY

Candidate Name

KIRKPATRICK, ANN, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB7003**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: CRIS SELIN

Candidate Name

KIRKPATRICK, ANN, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB7010**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6995

ERMK: BEVERLY HANSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7003

ERMK: REBECCA MURRAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7010

ERMK: CRIS SELIN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: JULIA ARRINGTON, PH.D.

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB7017**

Amount of Each Disbursement this Period

28.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: MAUREEN C KENNY

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB7024**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: BIERTA BARFOD

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB7031**

Amount of Each Disbursement this Period

87.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1	2	1	.	0	7
---	---	---	---	---	---

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7017

ERMK: JULIA ARRINGTON, PH.D.-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7024

ERMK: MAUREEN C KENNY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7031

ERMK: BIERTA BARFOD-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: STACY MASON

Candidate Name

KIRKPATRICK, ANN, , ,Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB7038**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

HASSAN, MAGGIE, , ,Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6927**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: JANE HARPER

Candidate Name

HASSAN, MAGGIE, , ,Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6934**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

120.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7038

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6927

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6934

ERMK: JANE HARPER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: SUSAN KAY

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6948**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: ANNE HENDREN

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6955**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: KAY KHAN

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6962**

Amount of Each Disbursement this Period

35.71

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.71

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6948

ERMK: SUSAN KAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6955

ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6962

ERMK: KAY KHAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 329 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: MELISSA JOHNSTON

Candidate Name

HASSAN, MAGGIE, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6969**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: BRENDA WILLETT

Candidate Name

HASSAN, MAGGIE, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6979**

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: SUSAN SANDS

Candidate Name

HASSAN, MAGGIE, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6984**

Amount of Each Disbursement this Period

7.14

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5	2	.	1	4
---	---	---	---	---

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6969

ERMK: MELISSA JOHNSTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6979

ERMK: BRENDA WILLETT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6984

ERMK: SUSAN SANDS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 332 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: BEVERLY HANSON

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C C00588772**Transaction ID : EXPB6991**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: LAURE WOODS

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C C00588772**Transaction ID : EXPB6998**

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: REBECCA MURRAY

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C C00588772**Transaction ID : EXPB6999**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2715.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6991

ERMK: BEVERLY HANSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6998

ERMK: LAURE WOODS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6999

ERMK: REBECCA MURRAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 335 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: CRIS SELIN

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB7006**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: JULIA ARRINGTON, PH.D.

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB7013**

Amount of Each Disbursement this Period

28.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: MAUREEN C KENNY

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB7020**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

38.57

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7006

ERMK: CRIS SELIN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7013

ERMK: JULIA ARRINGTON, PH.D.-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7020

ERMK: MAUREEN C KENNY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: BIERTA BARFOD

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB7027**

Amount of Each Disbursement this Period

87.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: STACY MASON

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB7034**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: STACY MASON

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB7040**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1097.50

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7027

ERMK: BIERTA BARFOD-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7034

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7040

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MONICA VERNON FOR CONGRESS

Mailing Address PO BOX 1635

City
CEDAR RAPIDSState
IAZip Code
52406Purpose of Disbursement
ERMK: THERESA RADER-WILSON

Candidate Name

VERNON, MONICA, , ,

Office Sought:



House



Senate



President

State: IA

District: 01

Disbursement For:



Primary



General



Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C C00571562**Transaction ID : EXPB6944**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

JUDGE, PATTY, , ,

Office Sought:



House



Senate



President

State: IA

District:

Disbursement For:



Primary



General



Other (specify)

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB6929**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: JANE HARPER

Candidate Name

JUDGE, PATTY, , ,

Office Sought:



House



Senate



President

State: IA

District:

Disbursement For:



Primary



General



Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB6936**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

130.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6944

ERMK: THERESA RADER-WILSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6929

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6936

ERMK: JANE HARPER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: SUSAN KAY

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB6950**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: ANNE HENDREN

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB6957**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: KAY KHAN

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB6964**

Amount of Each Disbursement this Period

35.71

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.71

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6950

ERMK: SUSAN KAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6957

ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6964

ERMK: KAY KHAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: MELISSA JOHNSTON

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB6971**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: NAN KANE

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB6976**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: BRENDA WILLETT

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB6981**

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

50.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6971

ERMK: MELISSA JOHNSTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6976

ERMK: NAN KANE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6981

ERMK: BRENDA WILLETT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 350 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: SUSAN SANDS

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB6986**

Amount of Each Disbursement this Period

7.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: BEVERLY HANSON

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB6993**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: REBECCA MURRAY

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB7001**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

22.14

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6986

ERMK: SUSAN SANDS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6993

ERMK: BEVERLY HANSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7001

ERMK: REBECCA MURRAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: CRIS SELIN

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB7008**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: JULIA ARRINGTON, PH.D.

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB7015**

Amount of Each Disbursement this Period

28.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: MAUREEN C KENNY

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB7022**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

38.57

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7008

ERMK: CRIS SELIN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7015

ERMK: JULIA ARRINGTON, PH.D.-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7022

ERMK: MAUREEN C KENNY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: BIERTA BARFOD

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB7029**

Amount of Each Disbursement this Period

87.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: STACY MASON

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB7036**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C C00574889**Transaction ID : EXPB6928**

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

197.50

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7029

ERMK: BIERTA BARFOD-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7036

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6928

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: JANE HARPER

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6935**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: SUSAN KAY

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6949**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: ANNE HENDREN

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6956**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

20.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6935

ERMK: JANE HARPER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6949

ERMK: SUSAN KAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6956

ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: KAY KHAN

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6963**

Amount of Each Disbursement this Period

35.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: MELISSA JOHNSTON

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6970**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: BRENDA WILLETT

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6980**

Amount of Each Disbursement this Period

35.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

80.71

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6963

ERMK: KAY KHAN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6970

ERMK: MELISSA JOHNSTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6980

ERMK: BRENDA WILLETT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: SUSAN SANDS

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6985**

Amount of Each Disbursement this Period

7.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: BEVERLY HANSON

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6992**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: REBECCA MURRAY

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB7000**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

22.14

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6985

ERMK: SUSAN SANDS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6992

ERMK: BEVERLY HANSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7000

ERMK: REBECCA MURRAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: CRIS SELIN

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB7007**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: JULIA ARRINGTON, PH.D.

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB7014**

Amount of Each Disbursement this Period

28.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: MAUREEN C KENNY

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB7021**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

38.57

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7007

ERMK: CRIS SELIN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7014

ERMK: JULIA ARRINGTON, PH.D.-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7021

ERMK: MAUREEN C KENNY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: BIERTA BARFOD

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB7028**

Amount of Each Disbursement this Period

87.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: STACY MASON

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB7035**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CATHERINE CORTEZ MASTO FOR SENATE

Mailing Address 8020 SOUTH RAINBOW BLVD. SUITE 100

City
LAS VEGASState
NVZip Code
89139Purpose of Disbursement
ERMK: SUSIE HWANG

Candidate Name

MASTO, CATHERINE CORTEZ, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NV

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00575548**Transaction ID : EXPB6910**

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3	4	7	.	5	0
---	---	---	---	---	---

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB7028

ERMK: BIERTA BARFOD-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB7035

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6910

ERMK: SUSIE HWANG-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: ELIZA COHEN

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB6803**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: EMERI HANDLER

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB6809**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: AMY RAO

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB6816**

Amount of Each Disbursement this Period

200.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

210.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6803

ERMK: ELIZA COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6809

ERMK: EMERI HANDLER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6816

ERMK: AMY RAO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: LARA JOHNSON

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

FEC Identification Number

C C00589820**Transaction ID : EXPB6821**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEBORAH ROSS FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: JULIA ROY

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

FEC Identification Number

C C00589820**Transaction ID : EXPB6828**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEBORAH ROSS FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: JOHN CHRISTIN

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

FEC Identification Number

C C00589820**Transaction ID : EXPB6835**

Amount of Each Disbursement this Period

15.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

40.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6821

ERMK: LARA JOHNSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6828

ERMK: JULIA ROY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6835

ERMK: JOHN CHRISTIN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB6842**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: ANDREA STERN

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB6849**

Amount of Each Disbursement this Period

35.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: MARGO MYERS

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB6856**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.71

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6842

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6849

ERMK: ANDREA STERN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6856

ERMK: MARGO MYERS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: PATTY BOAS

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00589820**Transaction ID : EXPB6863**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: ANN DEHOVITZ

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00589820**Transaction ID : EXPB6870**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: SHANNON HUNT-SCOTT

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00589820**Transaction ID : EXPB6876**

Amount of Each Disbursement this Period

50.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

60.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6863

ERMK: PATTY BOAS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6870

ERMK: ANN DEHOVITZ-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6876

ERMK: SHANNON HUNT-SCOTT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: BARB CHUPP

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00589820**Transaction ID : EXPB6882**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: JOYCE NEWSTAT

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00589820**Transaction ID : EXPB6889**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: ELLEN BROWN

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00589820**Transaction ID : EXPB6896**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6882

ERMK: BARB CHUPP-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6889

ERMK: JOYCE NEWSTAT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6896

ERMK: ELLEN BROWN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 389 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: STACY MASON

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00589820**Transaction ID : EXPB6903**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: LISA WALKER

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00589820**Transaction ID : EXPB6918**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: KARA BAYSINGER

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00589820**Transaction ID : EXPB6926**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1010.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6903

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6918

ERMK: LISA WALKER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6926

ERMK: KARA BAYSINGER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 392 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: EMERI HANDLER

Candidate Name

CLINTON, HILLARY RODHAM, , ,

Office Sought:

☐ House☐ Senate☒ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00575795**Transaction ID : EXPB6814**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: LARA JOHNSON

Candidate Name

CLINTON, HILLARY RODHAM, , ,

Office Sought:

☐ House☐ Senate☒ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00575795**Transaction ID : EXPB6826**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: JULIA ROY

Candidate Name

CLINTON, HILLARY RODHAM, , ,

Office Sought:

☐ House☐ Senate☒ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00575795**Transaction ID : EXPB6833**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

30.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6814

ERMK: EMERI HANDLER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6826

ERMK: LARA JOHNSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6833

ERMK: JULIA ROY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: JOHN CHRISTIN

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00575795**Transaction ID : EXPB6840**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00575795**Transaction ID : EXPB6847**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: ANDREA STERN

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00575795**Transaction ID : EXPB6854**

Amount of Each Disbursement this Period

35.71

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.71

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6840

ERMK: JOHN CHRISTIN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6847

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6854

ERMK: ANDREA STERN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: MARGO MYERS

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB6861**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: PATTY BOAS

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB6868**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: BARB CHUPP

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB6887**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6861

ERMK: MARGO MYERS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6868

ERMK: PATTY BOAS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6887

ERMK: BARB CHUPP-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: JOYCE NEWSTAT

Candidate Name

CLINTON, HILLARY RODHAM, , ,

Office Sought:

☐ House☐ Senate☒ President

State:

District:

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB6894**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: ELLEN BROWN

Candidate Name

CLINTON, HILLARY RODHAM, , ,

Office Sought:

☐ House☐ Senate☒ President

State:

District:

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB6901**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: STACY MASON

Candidate Name

CLINTON, HILLARY RODHAM, , ,

Office Sought:

☐ House☐ Senate☒ President

State:

District:

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB6908**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

30.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6894

ERMK: JOYCE NEWSTAT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6901

ERMK: ELLEN BROWN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6908

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: CAROL MUKHOPADHYAY

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB6913**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: DIANE ZACK

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: PA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6801**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: ELIZA COHEN

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: PA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6804**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1015.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6913

ERMK: CAROL MUKHOPADHYAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6801

ERMK: DIANE ZACK-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6804

ERMK: ELIZA COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 407 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: EMERI HANDLER

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6810**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: AMY RAO

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6817**

Amount of Each Disbursement this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: LARA JOHNSON

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6822**

Amount of Each Disbursement this Period

20.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

225.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6810

ERMK: EMERI HANDLER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6817

ERMK: AMY RAO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6822

ERMK: LARA JOHNSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 410 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: JULIA ROY

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6829**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: JOHN CHRISTIN

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6836**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6843**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6829

ERMK: JULIA ROY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6836

ERMK: JOHN CHRISTIN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6843

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 413 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: ANDREA STERN

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6850**

Amount of Each Disbursement this Period

35.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: MARGO MYERS

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6857**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: PATTY BOAS

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6864**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.71

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6850

ERMK: ANDREA STERN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6857

ERMK: MARGO MYERS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6864

ERMK: PATTY BOAS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: ANN DEHOVITZ

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6871**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: SHANNON HUNT-SCOTT

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6877**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: BARB CHUPP

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6883**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6871

ERMK: ANN DEHOVITZ-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6877

ERMK: SHANNON HUNT-SCOTT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6883

ERMK: BARB CHUPP-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: JOYCE NEWSTAT

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6890**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: ELLEN BROWN

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6897**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: STACY MASON

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6904**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

30.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6890

ERMK: JOYCE NEWSTAT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6897

ERMK: ELLEN BROWN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6904

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: CAROL MUKHOPADHYAY

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6912**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: LISA WALKER

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6919**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: MARY POWELL

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6923**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1015.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6912

ERMK: CAROL MUKHOPADHYAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6919

ERMK: LISA WALKER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6923

ERMK: MARY POWELL-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 425 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: ELLIE PHIPPS PRICE

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6924**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: BETSY COTTON

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6925**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: ELIZA COHEN

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6806**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2005.00

TOTAL This Period (last page this line number only)..... ►

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6924

ERMK: ELLIE PHIPPS PRICE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6925

ERMK: BETSY COTTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6806

ERMK: ELIZA COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 428 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: EMERI HANDLER

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6812**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: AMY RAO

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6818**

Amount of Each Disbursement this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: LARA JOHNSON

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6824**

Amount of Each Disbursement this Period

20.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

225.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6812

ERMK: EMERI HANDLER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6818

ERMK: AMY RAO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6824

ERMK: LARA JOHNSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: JULIA ROY

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6831**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: JOHN CHRISTIN

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6838**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6845**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6831

ERMK: JULIA ROY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6838

ERMK: JOHN CHRISTIN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6845

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: ANDREA STERN

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6852**

Amount of Each Disbursement this Period

35.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: MARGO MYERS

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6859**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: PATTY BOAS

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6866**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

45.71

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6852

ERMK: ANDREA STERN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6859

ERMK: MARGO MYERS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6866

ERMK: PATTY BOAS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: ANN DEHOVITZ

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6873**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: SHANNON HUNT-SCOTT

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6879**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: BARB CHUPP

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6885**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

60.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6873

ERMK: ANN DEHOVITZ-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6879

ERMK: SHANNON HUNT-SCOTT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6885

ERMK: BARB CHUPP-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: JOYCE NEWSTAT

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6892**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: ELLEN BROWN

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6899**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: STACY MASON

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6906**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

30.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6892

ERMK: JOYCE NEWSTAT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6899

ERMK: ELLEN BROWN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6906

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: LISA WALKER

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6921**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: ELIZA COHEN

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6807**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: EMERI HANDLER

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6813**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

15.00

TOTAL This Period (last page this line number only)..... ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: **SB23**

Transaction ID : **EXPB6921**

ERMK: LISA WALKER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: **SB23**

Transaction ID: **EXPB6807**

ERMK: ELIZA COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6813

ERMK: EMERI HANDLER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: AMY RAO

Candidate Name

HASSAN, MAGGIE, , ,Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6819**

Amount of Each Disbursement this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: LARA JOHNSON

Candidate Name

HASSAN, MAGGIE, , ,Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6825**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: JULIA ROY

Candidate Name

HASSAN, MAGGIE, , ,Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6832**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

225.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6819

ERMK: AMY RAO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6825

ERMK: LARA JOHNSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6832

ERMK: JULIA ROY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: JOHN CHRISTIN

Candidate Name

HASSAN, MAGGIE, , ,Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6839**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

HASSAN, MAGGIE, , ,Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6846**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: ANDREA STERN

Candidate Name

HASSAN, MAGGIE, , ,Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6853**

Amount of Each Disbursement this Period

35.74

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.74

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6839

ERMK: JOHN CHRISTIN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6846

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6853

ERMK: ANDREA STERN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: MARGO MYERS

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00588772**Transaction ID : EXPB6860**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: PATTY BOAS

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00588772**Transaction ID : EXPB6867**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: ANN DEHOVITZ

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00588772**Transaction ID : EXPB6874**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6860

ERMK: MARGO MYERS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6867

ERMK: PATTY BOAS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6874

ERMK: ANN DEHOVITZ-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: SHANNON HUNT-SCOTT

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00588772**Transaction ID : EXPB6880**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: BARB CHUPP

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00588772**Transaction ID : EXPB6886**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: JOYCE NEWSTAT

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00588772**Transaction ID : EXPB6893**

Amount of Each Disbursement this Period

15.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

70.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6880

ERMK: SHANNON HUNT-SCOTT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6886

ERMK: BARB CHUPP-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6893

ERMK: JOYCE NEWSTAT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: ELLEN BROWN

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6900**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: STACY MASON

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6907**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: SUSIE HWANG

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6909**

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

265.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6900

ERMK: ELLEN BROWN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6907

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6909

ERMK: SUSIE HWANG-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: CAROL MUKHOPADHYAY

Candidate Name

HASSAN, MAGGIE, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6914**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: CAROL MUKHOPADHYAY

Candidate Name

HASSAN, MAGGIE, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6915**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: LISA WALKER

Candidate Name

HASSAN, MAGGIE, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00588772**Transaction ID : EXPB6922**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6914

ERMK: CAROL MUKHOPADHYAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6915

ERMK: CAROL MUKHOPADHYAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6922

ERMK: LISA WALKER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 464 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: ELIZA COHEN

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB6805**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: EMERI HANDLER

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB6811**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: LARA JOHNSON

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB6823**

Amount of Each Disbursement this Period

20.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

30.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6805

ERMK: ELIZA COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6811

ERMK: EMERI HANDLER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6823

ERMK: LARA JOHNSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 467 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: JULIA ROY

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB6830**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: JOHN CHRISTIN

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB6837**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB6844**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6830

ERMK: JULIA ROY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6837

ERMK: JOHN CHRISTIN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6844

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 470 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: ANDREA STERN

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB6851**

Amount of Each Disbursement this Period

35.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: MARGO MYERS

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB6858**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: PATTY BOAS

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00612473**Transaction ID : EXPB6865**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.71

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6851

ERMK: ANDREA STERN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6858

ERMK: MARGO MYERS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6865

ERMK: PATTY BOAS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 473 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: ANN DEHOVITZ

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB6872**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: SHANNON HUNT-SCOTT

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB6878**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: BARB CHUPP

Candidate Name

JUDGE, PATTY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB6884**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6872

ERMK: ANN DEHOVITZ-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6878

ERMK: SHANNON HUNT-SCOTT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6884

ERMK: BARB CHUPP-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: JOYCE NEWSTAT

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB6891**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: ELLEN BROWN

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB6898**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: STACY MASON

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB6905**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6891

ERMK: JOYCE NEWSTAT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6898

ERMK: ELLEN BROWN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6905

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 479 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: LISA WALKER

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB6920**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: ELIZA COHEN

Candidate Name

DUCKWORTH, TAMMY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: IL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00574889**Transaction ID : EXPB6802**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: EMERI HANDLER

Candidate Name

DUCKWORTH, TAMMY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: IL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

FEC Identification Number

C C00574889**Transaction ID : EXPB6808**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6920

ERMK: LISA WALKER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6802

ERMK: ELIZA COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6808

ERMK: EMERI HANDLER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 482 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: AMY RAO

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6815**

Amount of Each Disbursement this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: LARA JOHNSON

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6820**

Amount of Each Disbursement this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: JULIA ROY

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6827**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

225.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6815

ERMK: AMY RAO-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6820

ERMK: LARA JOHNSON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6827

ERMK: JULIA ROY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 485 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: JOHN CHRISTIN

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6834**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: TOD COHEN

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6841**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: ANDREA STERN

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6848**

Amount of Each Disbursement this Period

35.71

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

55.71

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6834

ERMK: JOHN CHRISTIN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6841

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6848

ERMK: ANDREA STERN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 488 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: MARGO MYERS

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6855**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: PATTY BOAS

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6862**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: ANN DEHOVITZ

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6869**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6855

ERMK: MARGO MYERS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6862

ERMK: PATTY BOAS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6869

ERMK: ANN DEHOVITZ-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: SHANNON HUNT-SCOTT

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6875**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: BARB CHUPP

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6881**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: JOYCE NEWSTAT

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6888**

Amount of Each Disbursement this Period

15.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

70.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6875

ERMK: SHANNON HUNT-SCOTT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6881

ERMK: BARB CHUPP-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6888

ERMK: JOYCE NEWSTAT-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: ELLEN BROWN

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6895**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: STACY MASON

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6902**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: CAROL MUKHOPADHYAY

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6911**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

25.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6895

ERMK: ELLEN BROWN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6902

ERMK: STACY MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6911

ERMK: CAROL MUKHOPADHYAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: CAROL MUKHOPADHYAY

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6916**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: LISA WALKER

Candidate Name

DUCKWORTH, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00574889**Transaction ID : EXPB6917**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAIN FOR CONGRESS

Mailing Address PO BOX 1523

City
BANGORState
MEZip Code
04402Purpose of Disbursement
ERMK: LOIS TOEVS

Candidate Name

CAIN, EMILY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: ME

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	1	6		

FEC Identification Number

C C00546077**Transaction ID : EXPB6787**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6916

ERMK: CAROL MUKHOPADHYAY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6917

ERMK: LISA WALKER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6787

ERMK: LOIS TOEVS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. CAROL SHEA-PORTER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2016

Mailing Address P.O. BOX 453

City
ROCHESTERState
NHZip Code
03866Purpose of Disbursement
ERMK: LOIS TOEVS

Candidate Name

PORTER, CAROL SHEA, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District: 01

Category/
Type

FEC Identification Number

C C00419978**Transaction ID : EXPB6788**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CARROLL FOR COLORADO

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2016

Mailing Address PO BOX 470783

City
AURORAState
COZip Code
80047Purpose of Disbursement
ERMK: LOIS TOEVS

Candidate Name

CARROLL, MORGAN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: CO

District: 06

Category/
Type

FEC Identification Number

C C00580647**Transaction ID : EXPB6785**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CATHERINE CORTEZ MASTO FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2016

Mailing Address 8020 SOUTH RAINBOW BLVD. SUITE 100

City
LAS VEGASState
NVZip Code
89139Purpose of Disbursement
ERMK: MARILLE HERRMANN

Candidate Name

MASTO, CATHERINE CORTEZ, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NV

District:

Category/
Type

FEC Identification Number

C C00575548**Transaction ID : EXPB6781**

Amount of Each Disbursement this Period

10.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

20.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6788

ERMK: LOIS TOEVS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6785

ERMK: LOIS TOEVS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6781

ERMK: MARILLE HERRMANN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 503 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH ROSS FOR SENATE

Mailing Address PO BOX 28258

City
RALEIGHState
NCZip Code
27611Purpose of Disbursement
ERMK: ZENA MASON

Candidate Name

ROSS, DEBORAH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NC

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	1	6		

FEC Identification Number

C C00589820**Transaction ID : EXPB6798**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF ANNA THRONE-HOLST

Mailing Address PO BOX 6

City
SOUTHAMPTONState
NYZip Code
11969Purpose of Disbursement
ERMK: MARILLE HERRMANN

Candidate Name

THRONE-HOLST, ANNA, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	1	6		

FEC Identification Number

C C00578401**Transaction ID : EXPB6782**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: IRENE WAPNIR

Candidate Name

CLINTON, HILLARY RODHAM, , ,

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
0	9			2	9			2	0	1	6		

FEC Identification Number

C C00575795**Transaction ID : EXPB6776**

Amount of Each Disbursement this Period

50.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

75.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6798

ERMK: ZENA MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6782

ERMK: MARILLE HERRMANN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6776

ERMK: IRENE WAPNIR-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: EWA GAVRIELOV

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

FEC Identification Number

C C00575795**Transaction ID : EXPB6777**

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: SUZANNE BARTNIK

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

FEC Identification Number

C C00575795**Transaction ID : EXPB6778**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: JOHN CHRISTIN

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

FEC Identification Number

C C00575795**Transaction ID : EXPB6784**

Amount of Each Disbursement this Period

100.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

215.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6777

ERMK: EWA GAVRIELOV-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6778

ERMK: SUZANNE BARTNIK-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6784

ERMK: JOHN CHRISTIN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: ANNE HENDREN

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

FEC Identification Number

C C00575795**Transaction ID : EXPB6791**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: MEGAN CLAYTON

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

FEC Identification Number

C C00575795**Transaction ID : EXPB6792**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HILLARY FOR AMERICA

Mailing Address P.O. BOX 5256

City
NEW YORKState
NYZip Code
10185Purpose of Disbursement
ERMK: ZENA MASON

Candidate Name

CLINTON, HILLARY RODHAM, , ,Office Sought: ☐ House
☐ Senate
☒ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

FEC Identification Number

C C00575795**Transaction ID : EXPB6795**

Amount of Each Disbursement this Period

15.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

25.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6791

ERMK: ANNE HENDREN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6792

ERMK: MEGAN CLAYTON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6795

ERMK: ZENA MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 512 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: JILLIAN MCNERNEY

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6775**

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: MARILLE HERRMANN

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6779**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: MICHELLE MERCER

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6783**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1260.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6775

ERMK: JILLIAN MCNERNEY-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6779

ERMK: MARILLE HERRMANN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6783

ERMK: MICHELLE MERCER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 515 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: ZENA MASON

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6794**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KATIE MCGINTY FOR SENATE

Mailing Address PO BOX 22447

City
PHILADELPHIAState
PAZip Code
19110Purpose of Disbursement
ERMK: COURTNEY MOORE

Candidate Name

MCGINTY, KATHLEEN 'KATIE', , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: PA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	1	6		

FEC Identification Number

C C00582809**Transaction ID : EXPB6800**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR SENATE

Mailing Address PO BOX 34421

City
PHOENIXState
AZZip Code
85067Purpose of Disbursement
ERMK: ZENA MASON

Candidate Name

KIRKPATRICK, ANN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	1	6		

FEC Identification Number

C C00578484**Transaction ID : EXPB6797**

Amount of Each Disbursement this Period

15.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1030.00

TOTAL This Period (last page this line number only).....▶

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6794

ERMK: ZENA MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6800

ERMK: COURTNEY MOORE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6797

ERMK: ZENA MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 518 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: MARILLE HERRMANN

Candidate Name

HASSAN, MAGGIE, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2016

FEC Identification Number

C C00588772**Transaction ID : EXPB6780**

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
ERMK: ZENA MASON

Candidate Name

HASSAN, MAGGIE, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2016

FEC Identification Number

C C00588772**Transaction ID : EXPB6799**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MONICA VERNON FOR CONGRESS

Mailing Address PO BOX 1635

City
CEDAR RAPIDSState
IAZip Code
52406Purpose of Disbursement
ERMK: LOIS TOEVS

Candidate Name

VERNON, MONICA, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2016

FEC Identification Number

C C00571562**Transaction ID : EXPB6789**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

30.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6780

ERMK: MARILLE HERRMANN-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6799

ERMK: ZENA MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6789

ERMK: LOIS TOEVS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 521 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. PATTY JUDGE FOR IOWA

Mailing Address 321 E WALNUT ST SUITE 201

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
ERMK: ZENA MASON

Candidate Name

JUDGE, PATTY, , ,Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

FEC Identification Number

C C00612473**Transaction ID : EXPB6796**

Amount of Each Disbursement this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TADDEO FOR CONGRESS

Mailing Address PO BOX 432094

City
PO BOX 432094State
FLZip Code
33243Purpose of Disbursement
ERMK: LOIS TOEVS

Candidate Name

TADDEO, ANNETTE, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 26

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

FEC Identification Number

C C00445163**Transaction ID : EXPB6790**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TAMMY FOR ILLINOIS

Mailing Address P.O. BOX 59568

City
SCHAUMBURGState
ILZip Code
60159Purpose of Disbursement
ERMK: ZENA MASON

Candidate Name

DUCKWORTH, TAMMY, , ,Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

FEC Identification Number

C C00574889**Transaction ID : EXPB6793**

Amount of Each Disbursement this Period

15.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

35.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6796

ERMK: ZENA MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule: SB23

Transaction ID: EXPB6790

ERMK: LOIS TOEVS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6793

ERMK: ZENA MASON-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 524 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. VAL DEMINGS FOR CONGRESS

Mailing Address PO BOX 536926

City
ORLANDState
FLZip Code
32853Purpose of Disbursement
ERMK: LOIS TOEVS

Candidate Name

DEMINGS, VAL, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

FEC Identification Number

C C00590489**Transaction ID : EXPB6786**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5.00

33652.50

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SB23

Transaction ID : EXPB6786

ERMK: LOIS TOEVS-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 526 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MERCER, MICHELLE, , ,

Mailing Address 2500 STEINER STREET, #10

City
SAN FRANCISCOState
CAZip Code
94115Purpose of Disbursement
ERMK: MAGGIE FOR NH

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

010

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

FEC Identification Number

C

Transaction ID : EXPB6401

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1000.00

1000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 527 OF 531

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" 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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
REFUND OF CONTRIBUTION

010

Category/
Type

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	5			2	0	1	6		

FEC Identification Number

C C00588772

Transaction ID : EXPB6402

Amount of Each Disbursement this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAGGIE FOR NH

Mailing Address P.O. BOX 298

City
CONCORDState
NHZip Code
03302Purpose of Disbursement
REFUND OF CONTRIBUTION

010

Category/
Type

Candidate Name

HASSAN, MAGGIE, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C C00588772

Transaction ID : EXPB6405

Amount of Each Disbursement this Period

108.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

148.00

TOTAL This Period (last page this line number only)..... ►

148.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 528 OF 531

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HANSON BRIDGETT LLP

Nature of Debt (Purpose):

LEGAL AND COMPLIANCE

Mailing Address 425 MARKET STREET, 26TH FLOOR

City
SAN FRANCISCOState
CAZip Code
94105

Outstanding Balance Beginning This Period

1305.00

Transaction ID : PAYD3367

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1305.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARVEY, MEGHAN, , ,

Nature of Debt (Purpose):

SOCIAL MEDIA COMMUNICATIONS

Mailing Address 5425 CHARLOTTE WAY

City
LIVERMOREState
CAZip Code
94550

Outstanding Balance Beginning This Period

12.50

Transaction ID : PAYD6382

Amount Incurred This Period

0.00

Payment This Period

12.50

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARVEY, MEGHAN, , ,

Nature of Debt (Purpose):

SOCIAL MEDIA COMMUNICATIONS

Mailing Address 5425 CHARLOTTE WAY

City
LIVERMOREState
CAZip Code
94550

Outstanding Balance Beginning This Period

6.25

Transaction ID : PAYD6383

Amount Incurred This Period

0.00

Payment This Period

6.25

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

1305.00

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) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 529 OF 531

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARVEY, MEGHAN, , ,

Nature of Debt (Purpose):

SOCIAL MEDIA COMMUNICATIONSMailing Address **5425 CHARLOTTE WAY**

City

LIVERMORE

State

CA

Zip Code

94550

Outstanding Balance Beginning This Period

12.50**Transaction ID : PAYD6384**

Amount Incurred This Period

0.00

Payment This Period

12.50

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARVEY, MEGHAN, , ,

Nature of Debt (Purpose):

SOCIAL MEDIA COMMUNICATIONSMailing Address **5425 CHARLOTTE WAY**

City

LIVERMORE

State

CA

Zip Code

94550

Outstanding Balance Beginning This Period

12.50**Transaction ID : PAYD6385**

Amount Incurred This Period

0.00

Payment This Period

12.50

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARVEY, MEGHAN, , ,

Nature of Debt (Purpose):

SOCIAL MEDIA COMMUNICATIONSMailing Address **5425 CHARLOTTE WAY**

City

LIVERMORE

State

CA

Zip Code

94550

Outstanding Balance Beginning This Period

18.75**Transaction ID : PAYD6386**

Amount Incurred This Period

0.00

Payment This Period

18.75

Outstanding Balance at Close of This Period

0.001) **SUBTOTALS** This Period This Page (optional)..... ►**0.00**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) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 530 OF 531

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10
NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARVEY, MEGHAN, , ,

Nature of Debt (Purpose):

SOCIAL MEDIA COMMUNICATIONSMailing Address **5425 CHARLOTTE WAY**

City

LIVERMORE

State

CA

Zip Code

94550

Outstanding Balance Beginning This Period

437.50**Transaction ID : PAYD6388**

Amount Incurred This Period

0.00

Payment This Period

437.50

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARVEY, MEGHAN, , ,

Nature of Debt (Purpose):

SOCIAL MEDIA COMMUNICATIONSMailing Address **5425 CHARLOTTE WAY**

City

LIVERMORE

State

CA

Zip Code

94550

Outstanding Balance Beginning This Period

0.00**Transaction ID : PAYD7172**

Amount Incurred This Period

12.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

12.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VIEW AVENUE GROUP

Nature of Debt (Purpose):

COMPLIANCE/REPORTINGMailing Address **393 7TH AVENUE, SUITE 301**

City

SAN FRANCISCO

State

CA

Zip Code

94118

Outstanding Balance Beginning This Period

792.45**Transaction ID : PAYD4441**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

792.451) **SUBTOTALS** This Period This Page (optional)..... ►**804.95**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) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 531 OF 531

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10
NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VIEW AVENUE GROUPNature of Debt (Purpose):
COMPLIANCE/REPORTING

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Outstanding Balance Beginning This Period

1182.50

Transaction ID : PAYD5200

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1182.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VIEW AVENUE GROUPNature of Debt (Purpose):
COMPLIANCE SERVICES

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Outstanding Balance Beginning This Period

1170.00

Transaction ID : PAYD6379

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1170.00

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)..... ►

2352.50

2) **TOTALS** This Period (last page this line number only)..... ►

4462.45

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

4462.45