

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Women's Campaign Forum

ADDRESS (number and street) 1900 L Street, NW Suite 500  
 Check if different than previously reported. (ACC)  
Washington DC 20036

2. **FEC IDENTIFICATION NUMBER** C00424150  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly 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 11 02 2010 in the State of DC  
(d) 30-Day **Post -Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on in the State of

5. Covering Period 10 01 2010 through 10 13 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Siobhan Bennett  
Signature of Treasurer Electronically Filed by Siobhan Bennett Date 10 21 2010

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Women's Campaign Forum

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		21852.50
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	16823.04									
(c) Total Receipts (from Line 19) .....	4430.00	92029.52								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	21253.04	113882.02								
7. Total Disbursements (from Line 31) .....	3681.78	96310.76								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	17571.26	17571.26								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Women's Campaign Forum

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

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) .....	4000.00	47381.52
(ii) Unitemized .....	430.00	44648.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	4430.00	92029.52
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	4430.00	92029.52
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (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)) .....	4430.00	92029.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	4430.00	92029.52

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared 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.....	181.78	46635.76
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	181.78	46635.76
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	43400.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	6275.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	3681.78	96310.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3681.78	96310.76

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	4430.00	92029.52
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4430.00	92029.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	181.78	46635.76
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	181.78	46635.76

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

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

FOR LINE NUMBER: PAGE 6 / 9  
(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)  
Women's Campaign Forum

**A.** Full Name (Last, First, Middle Initial)  
Yael H. Jekogian

Mailing Address 171 E 84th St, Apt 28E  
Apt 28E

City State Zip Code  
New York NY 10028

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

Name of Employer Stay at Home Mom Occupation Stay at Home Mom

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 0 8 / 2 0 1 0

**Transaction ID:** C6301136

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
Kimberly C Oxholm

Mailing Address 1801 L St  
Apt 438

City State Zip Code  
Sacramento CA 95811-4168

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

Name of Employer Self Employed Occupation Financial Consultant

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 0 1 / 2 0 1 0

**Transaction ID:** C6288653

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4000.00**

**TOTAL** This Period (last page this line number only) ..... ► **4000.00**

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Women's Campaign Forum

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: D365475 Date of Disbursement 10 / 05 / 2010
	Mailing Address PO Box 53852	Amount of Each Disbursement this Period 1.63
	City Phoenix State AZ Zip Code 85072-3852	
	Purpose of Disbursement Merchant Services Fees Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bankcard Merchant	Transaction ID: D365467 Date of Disbursement 10 / 05 / 2010
	Mailing Address 7300 Chapman Hwy	Amount of Each Disbursement this Period 95.65
	City Knoxville State TN Zip Code 37920-6612	
	Purpose of Disbursement Merchant Services Fees Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bankcard Merchant	Transaction ID: D365468 Date of Disbursement 10 / 04 / 2010
	Mailing Address 7300 Chapman Hwy	Amount of Each Disbursement this Period 22.80
	City Knoxville State TN Zip Code 37920-6612	
	Purpose of Disbursement Merchant Services Fees Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	120.08
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Women's Campaign Forum

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bankcard Merchant</p> <p>Mailing Address 7300 Chapman Hwy</p> <p>City Knoxville State TN Zip Code 37920-6612</p> <p>Purpose of Disbursement Merchant Services Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D365469</p> <p>Date of Disbursement 10 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 9.00</p> <p>001 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bankcard Merchant</p> <p>Mailing Address 7300 Chapman Hwy</p> <p>City Knoxville State TN Zip Code 37920-6612</p> <p>Purpose of Disbursement Merchant Services Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D365470</p> <p>Date of Disbursement 10 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 38.34</p> <p>001 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Wachovia Bank</p> <p>Mailing Address PO Box 40031 Wachovia Bank, Regional Servicente</p> <p>City Roanoke State VA Zip Code 24022-0031</p> <p>Purpose of Disbursement Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D365474</p> <p>Date of Disbursement 10 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 14.36</p> <p>001 Category/ Type</p>

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

61.70

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

181.78



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Women's Campaign Forum

A.	Full Name (Last, First, Middle Initial) DELBENE FOR CONGRESS	Transaction ID: D365472 Date of Disbursement 10 / 07 / 2010
	Mailing Address PO Box 1406	Amount of Each Disbursement this Period 1000.00
	City Bellevue State WA Zip Code 98009	
	Purpose of Disbursement Federal Contribution Candidate Name Suzan Delbene	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kuster for Congress	Transaction ID: D365471 Date of Disbursement 10 / 05 / 2010
	Mailing Address PO BOX 1498	Amount of Each Disbursement this Period 1000.00
	City CONCORD State NH Zip Code 03302	
	Purpose of Disbursement Federal Contribution Candidate Name Ms. Ann McLane-Kuster	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ELAINE MARSHALL FOR SENATE	Transaction ID: D365473 Date of Disbursement 10 / 07 / 2010
	Mailing Address PO BOX 27288	Amount of Each Disbursement this Period 1500.00
	City RALEIGH State NC Zip Code 27611	
	Purpose of Disbursement Federal Contribution Candidate Name Elaine Marshall	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>3500.00</b>