

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
National Organization for Women PAC

ADDRESS (number and street) 1100 H Street, NW
3rd Fl
 Check if different than previously reported. (ACC)
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00092247
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 _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 09 01 2009 through 09 30 2009

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 Allendra Letsome
Signature of Treasurer Electronically Filed by Allendra Letsome Date 03 30 2011

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
National Organization for Women PAC

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	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>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		8413.35
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	1699.66									
(c) Total Receipts (from Line 19)	8357.25	26030.59								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	10056.91	34443.94								
7. Total Disbursements (from Line 31)	8929.72	33316.75								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1127.19	1127.19								
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)	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

National Organization for Women PAC

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	537.00	1570.00
(ii) Unitemized	820.25	12778.54
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1357.25	14348.54
(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)	1357.25	14348.54
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.)	7000.00	11682.05
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))	8357.25	26030.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	8357.25	26030.59

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	8929.72	31316.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	8929.72	31316.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	2000.00
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	0.00
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))..	8929.72	33316.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8929.72	33316.75

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	1357.25	14348.54
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1357.25	14348.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8929.72	31316.75
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8929.72	31316.75

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 16
	<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)
National Organization for Women PAC

A.

Full Name (Last, First, Middle Initial)
Ms. Joanne Baldwin

Mailing Address 7600 Ali Drive

City Lincoln State NE Zip Code 68507-3314

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

Name of Employer HERITAGE ADMINISTRATION SERVICES Occupation HR DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 16 / 2009

Transaction ID: SA11AI.34860

Amount of Each Receipt this Period 25.00

Contribution

B.

Full Name (Last, First, Middle Initial)
M Coleen Barker

Mailing Address 33542 Valle Road

City San Juan State CA Zip Code 92675-4800

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

Name of Employer American Financial Group Occupation mortgage loan consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 21 / 2009

Transaction ID: SA11AI.34886

Amount of Each Receipt this Period 25.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Ms. Sheila Bayne

Mailing Address 10 Whitcomb Street

City Belmont State MA Zip Code 02478-1253

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

Name of Employer TUFTS UNIVERSITY, MEDFORD, MA Occupation ADMINISTRATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 378.00

Date of Receipt 09 / 16 / 2009

Transaction ID: SA11AI.34882

Amount of Each Receipt this Period 42.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 92.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Organization for Women PAC

<p>A. Full Name (Last, First, Middle Initial) Ms. Priscilla Bellairs</p> <p>Mailing Address 63 Purchase Street</p> <p>City State Zip Code Newburyport MA 01950-3141</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer N. ESSEX COMM COLLEGE, HA- VERHILL, MA</p> <p>Occupation TEACHER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 360.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 09 / 21 / 2009</p> <p>Transaction ID: SA11AI.34888</p> <p>Amount of Each Receipt this Period 40.00</p> <p>Contribution</p>
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<p>B. Full Name (Last, First, Middle Initial) Ms. Mary Boice</p> <p>Mailing Address 8 Coronado Shrs</p> <p>City State Zip Code Lincoln City OR 97367-5201</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired</p> <p>Occupation RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 09 / 16 / 2009</p> <p>Transaction ID: SA11AI.34855</p> <p>Amount of Each Receipt this Period 25.00</p> <p>Contribution</p>
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<p>C. Full Name (Last, First, Middle Initial) Ms. Xandra Coe</p> <p>Mailing Address 3827 Sheridan Avenue, S.</p> <p>City State Zip Code Minneapolis MN 55410-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer None</p> <p>Occupation Artist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 09 / 16 / 2009</p> <p>Transaction ID: SA11AI.34863</p> <p>Amount of Each Receipt this Period 25.00</p> <p>Contribution</p>
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SUBTOTAL of Receipts This Page (optional)	90.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Organization for Women PAC

A. Full Name (Last, First, Middle Initial)
Ms. Sue Errington

Mailing Address 3200 Brook Drive

City State Zip Code
Muncie IN 47304-2915

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
PLANNED PARENTHOOD OF GREATER INDIANA DIRECTOR OF PUBLIC POLICY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 21 / 2009

Transaction ID: SA11AI.34889

Amount of Each Receipt this Period
25.00

Contribution

B. Full Name (Last, First, Middle Initial)
Prof. Tracey George

Mailing Address 131 21st Avenue South

City State Zip Code
Nashville TN 37203-1181

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Vanderbilt University, Nashville, TN professor

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2009

Transaction ID: SA11AI.34867

Amount of Each Receipt this Period
25.00

Contribution

C. Full Name (Last, First, Middle Initial)
Ms. Ursula Gusse

Mailing Address 316 Curl Creek Road

City State Zip Code
Greenwood SC 29649-8519

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 21 / 2009

Transaction ID: SA11AI.34884

Amount of Each Receipt this Period
25.00

Contribution

SUBTOTAL of Receipts This Page (optional) 75.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 16
	<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)
National Organization for Women PAC

A.	Full Name (Last, First, Middle Initial) M.D. Thomas Gutheil	Date of Receipt MM / DD / YYYY 09 / 16 / 2009
	Mailing Address 6 Wellman Street	Transaction ID: SA11AI.34865
	City State Zip Code Brookline MA 02446-2831	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer self Occupation self M.D.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) Ms. Edith Herron	Date of Receipt MM / DD / YYYY 09 / 16 / 2009
	Mailing Address 36 Park Avenue	Transaction ID: SA11AI.34866
	City State Zip Code Rehoboth Beach DE 19971-2842	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer SELF EMPLOYED Occupation SELF EMPLOYED COMPUTER CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

C.	Full Name (Last, First, Middle Initial) Ms. Betty Holling	Date of Receipt MM / DD / YYYY 09 / 16 / 2009
	Mailing Address 15 Sylvan Avenue	Transaction ID: SA11AI.34880
	City State Zip Code Chelmsford MA 01824-2327	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer NONE Occupation NONE HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

SUBTOTAL of Receipts This Page (optional)	100.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 16
	<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)
National Organization for Women PAC

A.	Full Name (Last, First, Middle Initial) Ms Margaret Mccartney		Date of Receipt
	Mailing Address 19381 Via Real Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 16 / 2009
	City	State	Zip Code
	Saratoga	CA	95070-4527
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.34853
Name of Employer Retired		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
		<input type="text"/> 225.00	Contribution

B.	Full Name (Last, First, Middle Initial) Mr. William McFarlane, Jr.		Date of Receipt
	Mailing Address 234 1/2 9th Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 16 / 2009
	City	State	Zip Code
	West Palm Beach	FL	33401-3704
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.34874
Name of Employer Retired		Occupation retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
		<input type="text"/> 225.00	Contribution

C.	Full Name (Last, First, Middle Initial) Ms. Zoanne Nordstrom		Date of Receipt
	Mailing Address 370 Surrey Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 16 / 2009
	City	State	Zip Code
	San Francisco	CA	94131-2960
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.34862
Name of Employer Retired		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
		<input type="text"/> 225.00	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 75.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Organization for Women PAC

<p>A. Full Name (Last, First, Middle Initial) Ms. Shirley Plapp</p> <p>Mailing Address 8914 Rockmont Terrace</p> <p>City State Zip Code Colorado Springs CO 80920-6802</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation RETIRED RN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 270.00</p>	<p>Date of Receipt 09 / 21 / 2009</p> <p>Transaction ID: SA11AI.34896</p> <p>Amount of Each Receipt this Period 30.00</p> <p>Contribution</p>
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<p>B. Full Name (Last, First, Middle Initial) Mr. Stanley Schroeder</p> <p>Mailing Address 572 Wapiti Loop</p> <p>City State Zip Code Hamilton MT 59840-9605</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer NONE Occupation RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>	<p>Date of Receipt 09 / 21 / 2009</p> <p>Transaction ID: SA11AI.34902</p> <p>Amount of Each Receipt this Period 25.00</p> <p>Contribution</p>
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<p>C. Full Name (Last, First, Middle Initial) Ms.Carolynn Schwartz</p> <p>Mailing Address 946 Jenifer St</p> <p>City State Zip Code Madison WI 53703-3522</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer self Occupation musician</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>	<p>Date of Receipt 09 / 16 / 2009</p> <p>Transaction ID: SA11AI.34877</p> <p>Amount of Each Receipt this Period 25.00</p> <p>Contribution</p>
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SUBTOTAL of Receipts This Page (optional)	80.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 16
	(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)
National Organization for Women PAC

A.

Full Name (Last, First, Middle Initial) Ms. Louise Young		Date of Receipt
Mailing Address 325 Pepperwood Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 16 / 2009
City	State	Zip Code
Little River	CA	95425-0000
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.34868
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 25.00
Name of Employer	Occupation	Contribution
Retired	Teacher	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 225.00	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 25.00
TOTAL This Period (last page this line number only)	<input type="text"/> 537.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 13 / 16	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Organization for Women PAC

A.	Full Name (Last, First, Middle Initial) National Organization for Women, Inc		Date of Receipt	
	Mailing Address 1100 H Street, NW		M M / D D / Y Y Y Y 09 / 25 / 2009	
	City	State	Zip Code	Transaction ID: SA17.34925
	Washington	DC	20005	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		7000.00		
Name of Employer		Occupation		Transfer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 11682.05		

SUBTOTAL of Receipts This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	7000.00

**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)
National Organization for Women PAC

A.	Full Name (Last, First, Middle Initial) Authorize.net	Transaction ID: SB21B.34920 Date of Disbursement 09 / 02 / 2009
	Mailing Address 915 S. 500 E. Suite 200	Amount of Each Disbursement this Period 25.00
	City American Fork State UT Zip Code 84003	
	Purpose of Disbursement Processing fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Global STL NDPS	Transaction ID: SB21B.34918 Date of Disbursement 09 / 02 / 2009
	Mailing Address 10 Glenlake Parkway NE North Tower	Amount of Each Disbursement this Period 41.83
	City Atlanta State GA Zip Code 30328	
	Purpose of Disbursement Processing fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Global STL NDPS	Transaction ID: SB21B.34919 Date of Disbursement 09 / 02 / 2009
	Mailing Address 10 Glenlake Parkway NE North Tower	Amount of Each Disbursement this Period 32.50
	City Atlanta State GA Zip Code 30328	
	Purpose of Disbursement Processing fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	99.33
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
National Organization for Women PAC

A.	Full Name (Last, First, Middle Initial) Payment Solutions	Transaction ID: SB21B.34908 Date of Disbursement
	Mailing Address P O Box 30217	<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City Bethesda State MD Zip Code 20924	Amount of Each Disbursement this Period
	Purpose of Disbursement Processing fee	<input type="text" value="292.60"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Payment Solutions	Transaction ID: SB21B.34909 Date of Disbursement
	Mailing Address P O Box 30217	<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City Bethesda State MD Zip Code 20924	Amount of Each Disbursement this Period
	Purpose of Disbursement Processing fee	<input type="text" value="445.80"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Tri-State Envelope Corporation	Transaction ID: SB21B.34907 Date of Disbursement
	Mailing Address P.O. Box 433	<input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City Beltsville State MD Zip Code 20704	Amount of Each Disbursement this Period
	Purpose of Disbursement Printing fee	<input type="text" value="620.42"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1358.82"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
National Organization for Women PAC

A.

Full Name (Last, First, Middle Initial)
US Postal Service

Transaction ID: SB21B.34910
Date of Disbursement

Mailing Address P.O. Box 92200

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	0	9

City Washington State DC Zip Code 20090-2200

Amount of Each Disbursement this Period

7408.27

Purpose of Disbursement
Mail cost

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

7408.27

TOTAL This Period (last page this line number only)

8866.42