

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

FEMINIST MAJORITY PAC

Report Covering the Period:

From:

01 ' *01* ' *2015*

To:

06 ' *30* ' *2015*

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <i>2015</i>		<i>256189</i>
(b) Cash on Hand at Beginning of Reporting Period.....	<i>256189</i>	
(c) Total Receipts (from Line 19).....	<i>11090⁰⁰</i>	<i>11090⁰⁰</i>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<i>1365189</i>	<i>1365189</i>
7. Total Disbursements (from Line 31).....	<i>678390</i>	<i>678390</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<i>686799</i>	<i>686799</i>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<i>0</i>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<i>0</i>	



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

11-11-0000-NO-6N-40-61-0N

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

FEMINIST MAJORITY PAC

Report Covering the Period:

From:

MM ' DD ' YYYY
01 ' 01 ' 2015

To:

MM ' DD ' YYYY
06 ' 30 ' 2015

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).....

1,600.00

11,000.00

(ii) Unitemized

90.00

90.00

(iii) TOTAL (add
Lines 11(a)(i) and (ii).....▶

11,090.00

11,090.00

(b) Political Party Committees

0

0

(c) Other Political Committees
(such as PACs).....

0

0

(d) Total Contributions (add Lines
11(a)(iii), (b), and (c)) (Carry
Totals to Line 33, page 5).....▶

11,090.00

11,090.00

12. Transfers From Affiliated/Other
Party Committees.....

0

0

13. All Loans Received.....

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures
(Refunds, Rebates, etc.)
(Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made
to Federal Candidates and Other
Political Committees.....

0

0

17. Other Federal Receipts
(Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account
(from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶

11,090.00

11,090.00

20. Total Federal Receipts
(subtract Line 18(c) from Line 19).....▶

11,090.00

11,090.00

20150630 11090.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share	0	0
(b) Other Federal Operating Expenditures	783.90	783.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	783.90	783.90
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	6,000.00	6,000.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6,783.90	6,783.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	6,783.90	6,783.90

W11111000014010101

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE <u>6</u> OF <u>14</u>
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY PAC

A. Full Name (Last, First, Middle Initial)
YORKIN PEG

Mailing Address C/O MANN, GELON ET AL
1800 CENTURY PARK EAST, #950

City LOS ANGELES, CA State Zip Code 90067

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date 5,000.00

Date of Receipt
06/19/2015

Amount of Each Receipt this Period
5,000.00

B. Full Name (Last, First, Middle Initial)
SPILLAR, KATHERINE

Mailing Address P.O. BOX 837

City VENICE, CA State Zip Code 90294

FEC ID number of contributing federal political committee. C

Name of Employer FEMINIST MAJORITY FDN Occupation EXECUTIVE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date 500.00

Date of Receipt
06/30/2015

Amount of Each Receipt this Period
500.00

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

Mailing Address P.O. BOX 837

City VENICE, CA State Zip Code 90294

FEC ID number of contributing federal political committee. C

Name of Employer FEMINIST MAJORITY FDN Occupation EXECUTIVE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date 1,000.00

Date of Receipt
06/30/2015

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) 6,000.00

TOTAL This Period (last page this line number only)

20150630 10:40:14 AM

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

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

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 14

<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)

FEMINIST MAJORITY FOUNDATION

<p>A. Full Name (Last, First, Middle Initial) LEIF, CAROL</p>		<p>Date of Receipt 06 30 2015</p>
<p>Mailing Address ^{C/O NKSF LLP} 10960 WILSHIRE BLVD, 5th Floor</p>		<p>Amount of Each Receipt this Period 5,000.00</p>
<p>City LDS ANGELES, CA State Zip Code 90024</p>	<p>FEC ID number of contributing federal political committee. C</p>	
<p>Name of Employer SELF EMPLOYED</p>	<p>Occupation COMEDIAN/ACTRESS</p>	<p>Aggregate Year-to-Date 5,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼</p>	

<p>B. Full Name (Last, First, Middle Initial)</p>		<p>Date of Receipt</p>
<p>Mailing Address</p>		<p>Amount of Each Receipt this Period</p>
<p>City</p>	<p>State Zip Code</p>	
<p>FEC ID number of contributing federal political committee. C</p>		<p>Aggregate Year-to-Date</p>
<p>Name of Employer</p>	<p>Occupation</p>	
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼</p>	<p>Aggregate Year-to-Date</p>
<p>Name of Employer</p>		

<p>C. Full Name (Last, First, Middle Initial)</p>		<p>Date of Receipt</p>
<p>Mailing Address</p>		<p>Amount of Each Receipt this Period</p>
<p>City</p>	<p>State Zip Code</p>	
<p>FEC ID number of contributing federal political committee. C</p>		<p>Aggregate Year-to-Date</p>
<p>Name of Employer</p>	<p>Occupation</p>	
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼</p>	<p>Aggregate Year-to-Date</p>
<p>Name of Employer</p>		

<p>SUBTOTAL of Receipts This Page (optional).....▶</p>	<p>5,000.00</p>
<p>TOTAL This Period (last page this line number only).....▶</p>	<p>11,000.00</p>

20150630 10001110

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 14
	<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	

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)
FEMINIST MAJORITY PAC

A. Full Name (Last, First, Middle Initial) PAY PAL, INC.		Date of Disbursement 02/03/2015
Mailing Address 400 SOLUTIONS CENTER		Amount of Each Disbursement this Period 54.10
City CHICAGO, IL State Zip Code 60677		
Purpose of Disbursement MONTHLY PROCESSING FEE		Category/Type 003
Candidate Name N/A		
Of/Ace 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) BANK OF AMERICA		Date of Disbursement 02/07/2015
Mailing Address PO BOX 830175		Amount of Each Disbursement this Period 52.65
City DALLAS TX State Zip Code 75283		
Purpose of Disbursement BANK SERVICE CHARGE		Category/Type 003
Candidate Name N/A		
Of/Ace 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)		Date of Disbursement
Mailing Address		M M / D D / Y Y Y Y Y Y
City State Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement		
Candidate Name		Category/Type
Of/Ace 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).....	106.75
TOTAL This Period (last page this line number only).....	

20150204 1000117

SCHEDULE B (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

PAGE 9 OF 14

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NAME OF COMMITTEE (in Full)
FEMINIST MAJORITY PAC

A. Full Name (Last, First, Middle Initial)
PAY PAL, INC.

Date of Disbursement
03/03/2015

Mailing Address
400 SOLUTIONS CENTER

City **CHICAGO** IL State **IL** Zip Code **60677**

Purpose of Disbursement
MONTHLY PROCESSING FEE

Candidate Name
N/A

Category/Type
003

Amount of Each Disbursement this Period
54.10

Of/Ace Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

B. Full Name (Last, First, Middle Initial)
BANK OF AMERICA

Date of Disbursement
03/16/2015

Mailing Address
PO BOX 830175

City **DALLAS** TX State **TX** Zip Code **75283**

Purpose of Disbursement
BANK SERVICE CHARGE

Candidate Name
N/A

Category/Type
003

Amount of Each Disbursement this Period
50.79

Of/Ace Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

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

Date of Disbursement

Mailing Address

City _____ State _____ Zip Code _____

Purpose of Disbursement

Candidate Name

Category/Type

Amount of Each Disbursement this Period

Of/Ace Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

SUBTOTAL of Disbursements This Page (optional).....▶ **104.89**

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

2016042300071718

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 14
	<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)
FEMINIST MAJORITY PAC

A. Full Name (Last, First, Middle Initial) PAY PAL, INC.		Date of Disbursement 04/03/2015
Mailing Address 400 SOLUTIONS CENTER		Amount of Each Disbursement this Period 54.10
City CHICAGO, IL	State Zip Code 60677	
Purpose of Disbursement MONTHLY PROCESSING FEE	Category/Type 1003	
Candidate Name N/A		
Of/Ace 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) BANK OF AMERICA		Date of Disbursement 04/15/2015
Mailing Address PO BOX 830175		Amount of Each Disbursement this Period 50.79
City DALLAS TX	State Zip Code 75283	
Purpose of Disbursement BANK SERVICE CHARGE	Category/Type 003	
Candidate Name N/A		
Of/Ace 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)		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement	Category/Type	Amount of Each Disbursement this Period
Candidate Name		
Of/Ace 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).....▶	104.89
TOTAL This Period (last page this line number only).....▶	

20150420 00071719

SCHEDULE B (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

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NAME OF COMMITTEE (In Full)
FEMINIST MAJORITY PAC

A. Full Name (Last, First, Middle Initial) PAY PAL, INC.		Date of Disbursement 06/03/2015
Mailing Address 400 SOLUTIONS CENTER		Amount of Each Disbursement this Period 54.10
City CHICAGO, IL State Zip Code 60677		
Purpose of Disbursement MONTHLY PROCESSING FEE		Category/Type 003
Candidate Name N/A		
Of/Ace 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) BANK OF AMERICA		Date of Disbursement 06/15/2015
Mailing Address PO BOX 830175		Amount of Each Disbursement this Period 50.78
City DALLAS, TX State Zip Code 75283		
Purpose of Disbursement BANK SERVICE CHARGE		Category/Type 003
Candidate Name N/A		
Of/Ace 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)		Date of Disbursement
Mailing Address		
City State Zip Code		
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Of/Ace 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)	104.88
TOTAL This Period (last page this line number only)	633.93

20150615 10:04:21

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 13 OF 14
	<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)
FEMINIST MAJORITY PAC

Full Name (Last, First, Middle Initial) A. PAY PAL, INC.		Date of Disbursement 10/05/2015
Mailing Address 400 SOLUTIONS CENTER		Amount of Each Disbursement this Period 54.10
City CHICAGO, IL	State Zip Code 60677	
Purpose of Disbursement MONTHLY PROCESSING FEE		Category/Type 1003
Candidate Name N/A		
Of/Ace Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. BANK OF AMERICA		Date of Disbursement 10/02/2015
Mailing Address PO BOX 830175		Amount of Each Disbursement this Period 535.91
City DALLAS, TX	State Zip Code 75283	
Purpose of Disbursement BANK SERVICE CHARGE		Category/Type 003
Candidate Name N/A		
Of/Ace Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Of/Ace 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).....▶	107.69
TOTAL This Period (last page this line number only).....▶	

2015-10-05 10:00:00 AM

FedEx

Express

earthsmart
 FedEx carbon
 envelope shipping

Page 1 of 2

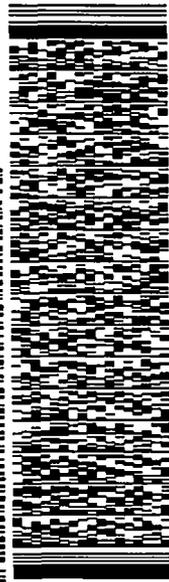
ORIGIN ID: ZFOA (703) 522-2214
 DIANE CUTRI
 FEMINIST MAJORITY EC OFFICE
 1600 WILSON BLVD
 ARLINGTON, VA 22209
 UNITED STATES US

SHIP DATE: 22 APR 16
 ACT WT: 0.50 LB
 CAD: 148432 / NET 37.30
 BILL SENDER

TO **FEC**
FEDERAL ELECTION COMMISSION
999 E STREET, NW

WASHINGTON DC 20463

(202) 694-1100 REF: EMPAC70
 INV. PO. DEPT:



540J1M042727F

0689 04 23

15:00

F677

FZ

MON - 25 APR 3:00P
 STANDARD OVERNIGHT

TRK# 7761 7439 0689

0201

20463
 DC-US IAD

SA RDVA



2016 APR 25 PM 2:33

UNITED STATES

to Add Rec ba to: an to: Cr sh in: the pr of

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>fed ex</i>	Shipping Date <i>4/22/16</i>
	Next Business Day Delivery <input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

[Signature]
 PREPARER

4/25/16
 DATE PREPARED

NON-PROFIT ORGANIZATION