

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. NATIONAL ORGANIZATION FOR WOMEN PAC

ADDRESS (number and street) 1100 H STREET, NW 3RD FL WASHINGTON DC 20005

2. FEC IDENTIFICATION NUMBER C C00092247 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) (b) Monthly Report Due On: Feb 20 (M2) (c) 12-Day PRE-Election Report for the: Primary (12P) (d) 30-Day POST-Election Report for the: General (30G)

5. Covering Period 09 01 2013 through 09 30 2013

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 Linda Berg Signature of Treasurer Linda Berg [Electronically Filed] Date 10 07 2013

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**NATIONAL ORGANIZATION FOR WOMEN PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		34271.44
(b) Cash on Hand at Beginning of Reporting Period.....	47685.02	
(c) Total Receipts (from Line 19) .....	4181.25	44848.75
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	51866.27	79120.19
7. Total Disbursements (from Line 31).....	369.33	27623.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	51496.94	51496.94
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

**DETAILED SUMMARY PAGE**  
of Receipts

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).....	690.00	8335.00
(ii) Unitemized .....	3491.25	36513.75
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4181.25	44848.75
(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) .....	4181.25	44848.75
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 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))..... ▶	4181.25	44848.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	4181.25	44848.75

**DETAILED SUMMARY PAGE**

of Disbursements

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 .....	369.33	26841.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	369.33	26841.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	781.40
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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) 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)) ..	369.33	27623.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	369.33	27623.25

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	4181.25	44848.75
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4181.25	44848.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	369.33	26841.85
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	369.33	26841.85

**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 18  
(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)  
**NATIONAL ORGANIZATION FOR WOMEN PAC**

Full Name (Last, First, Middle Initial)  
**A. Priscilla Bellairs**

Mailing Address 63 Purchase Street

City State Zip Code  
Newburyport MA 01950-3141

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

Name of Employer Occupation  
n. essex comm college, haverhill, ma teacher

Receipt For: 2012  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2013  
**Transaction ID : SA11AI.5826**

Amount of Each Receipt this Period  
40.00

Full Name (Last, First, Middle Initial)  
**B. Janet Canterbury**

Mailing Address 10700 SW 90 Ave

City State Zip Code  
Miami FL 33176

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

Name of Employer Occupation  
university of miami dean. medical school

Receipt For: 2012  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2013  
**Transaction ID : SA11AI.5700**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. Xandra Coe**

Mailing Address 3827 Sheridan Avenue, S.

City State Zip Code  
Minneapolis MN 55410-1227

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

Name of Employer Occupation  
none artist

Receipt For: 2012  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2013  
**Transaction ID : SA11AI.5791**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 115.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI  
Transaction ID : SA11AI.5826  
268177

Form/Schedule: SA11AI  
Transaction ID: SA11AI.5700  
391649

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI  
Transaction ID : SA11AI.5791  
12582423

Form/Schedule:  
Transaction ID:



**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 18  
(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**

Full Name (Last, First, Middle Initial)  
**A. Allison Coudert**

Mailing Address 2728 Portola Way

City State Zip Code  
Sacramento CA 95818-3534

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

Name of Employer Occupation  
university of california professor

Receipt For: 2012  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 23 / 2013  
**Transaction ID : SA11AI.5766**

Amount of Each Receipt this Period  
300.00

Full Name (Last, First, Middle Initial)  
**B. Diane DiCarlo**

Mailing Address 65 Wellesley Avenue

City State Zip Code  
Needham MA 02494-1821

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

Name of Employer Occupation  
retired retired

Receipt For: 2012  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2013  
**Transaction ID : SA11AI.5831**

Amount of Each Receipt this Period  
35.00

Full Name (Last, First, Middle Initial)  
**C. 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: 2012  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2013  
**Transaction ID : SA11AI.5775**

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 365.00

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI  
Transaction ID : SA11AI.5766  
1531219

Form/Schedule: SA11AI  
Transaction ID: SA11AI.5831  
4919130

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.5775

410605

Form/Schedule:

Transaction ID:

**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 18  
(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**

Full Name (Last, First, Middle Initial)  
**A. Edith Herron**

Mailing Address 36 Park Avenue

City Rehoboth Beach State DE Zip Code 19971-2842

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

Name of Employer self employed Occupation computer consultant

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
09 / 20 / 2013  
**Transaction ID : SA11AI.5786**

Amount of Each Receipt this Period  
**40.00**

Full Name (Last, First, Middle Initial)  
**B. A. Claire Major**

Mailing Address 1301 W. Ash St

City Columbia State MO Zip Code 65203

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
09 / 20 / 2013  
**Transaction ID : SA11AI.5721**

Amount of Each Receipt this Period  
**25.00**

Full Name (Last, First, Middle Initial)  
**C. Zoanne Nordstrom**

Mailing Address 370 Surrey Street

City San Francisco State CA Zip Code 94131-2960

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

Name of Employer retired Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
09 / 20 / 2013  
**Transaction ID : SA11AI.5789**

Amount of Each Receipt this Period  
**25.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **90.00**

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI  
Transaction ID : SA11AI.5786  
7129521

Form/Schedule: SA11AI  
Transaction ID: SA11AI.5721  
11875242

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.5789

716373

Form/Schedule:

Transaction ID:

**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 18  
(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**

Full Name (Last, First, Middle Initial)  
**A. Terry O'Neill**

Mailing Address 8322 N. Brook Lane

City State Zip Code  
Bethesda MD 20814-2613

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

Name of Employer Occupation  
national organization for women president of now

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2013

**Transaction ID : SA11AI.5850**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**B. Mary Vassallo**

Mailing Address 81 Greenmount Terrace

City State Zip Code  
Waterbury CT 06708-4212

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

Name of Employer Occupation  
retired educator

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2013

**Transaction ID : SA11AI.5847**

Amount of Each Receipt this Period  
20.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	120.00
<b>TOTAL</b> This Period (last page this line number only).....▶	690.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI  
Transaction ID : SA11AI.5850  
10595312

Form/Schedule: SA11AI  
Transaction ID: SA11AI.5847  
1986009



**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**

Full Name (Last, First, Middle Initial)

**A. Authnet Gateway Authorize.Net**

Mailing Address PO Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement  
credit card processing fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 04 / 2013

**Transaction ID : SB21B.5874**

Amount of Each Disbursement this Period

26.80

Full Name (Last, First, Middle Initial)

**B. Global STL Global Payments**

Mailing Address 10 Glenlake Parkway, NE  
North Tower

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
credit card processing fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 04 / 2013

**Transaction ID : SB21B.5873**

Amount of Each Disbursement this Period

19.33

Full Name (Last, First, Middle Initial)

**C. Global STL Global Payments**

Mailing Address 10 Glenlake Parkway, NE  
North Tower

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
credit card processing fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 04 / 2013

**Transaction ID : SB21B.5875**

Amount of Each Disbursement this Period

80.42

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

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

126.55

**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**

Full Name (Last, First, Middle Initial)

**A. Payment Solutions, Inc.**

Mailing Address P.O. Box 30217

City State Zip Code  
Bethesda MD 20824

Purpose of Disbursement  
credit card processing fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 05 / 2013

**Transaction ID : SB21B.5870**

Amount of Each Disbursement this Period

70.20

Full Name (Last, First, Middle Initial)

**B. Payment Solutions, Inc.**

Mailing Address P.O. Box 30217

City State Zip Code  
Bethesda MD 20824

Purpose of Disbursement  
credit card processing fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
09 / 30 / 2013

**Transaction ID : SB21B.5871**

Amount of Each Disbursement this Period

101.60

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

/  /

Amount of Each Disbursement this Period

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

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

171.80

298.35