

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.

Women Speak Out PAC

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input checked="" type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period / / through / /

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 Emily Buchanan

Signature of Treasurer Emily Buchanan [Electronically Filed] Date / /

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									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Women Speak Out 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="2012"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="247755.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="611035.08"/>	<input type="text" value="861135.08"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="858790.08"/>	<input type="text" value="861135.08"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="788747.16"/>	<input type="text" value="791092.16"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="70042.92"/>	<input type="text" value="70042.92"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Women Speak Out 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).....	515351.00	765351.00
(ii) Unitemized	95684.08	95784.08
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	611035.08	861135.08
(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)	611035.08	861135.08
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))..... ▶	611035.08	861135.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	611035.08	861135.08

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	53669.58	56014.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	53669.58	56014.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	735077.58	735077.58
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)) ..	788747.16	791092.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	788747.16	791092.16

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)	611035.08	861135.08
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	611035.08	861135.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	53669.58	56014.58
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	53669.58	56014.58

**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 OF 46
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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 Speak Out PAC

A. Joanne Aarseth
 Full Name (Last, First, Middle Initial)
 Mailing Address 20840 Miranda Falls Square
 City State Zip Code
 Sterling VA 20165-2482
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Freddie Mac Lawyer
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2012
Transaction ID : SA11AI.9177
 Amount of Each Receipt this Period
 250.00

B. Gerard Abreo
 Full Name (Last, First, Middle Initial)
 Mailing Address 3523 Almond Creek Drive
 City State Zip Code
 Houston TX 77059-2819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 S.E. Houston Cardiology Cardiologist
 Receipt For: 2012
 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
 10 / 03 / 2012
Transaction ID : SA11AI.7451
 Amount of Each Receipt this Period
 1000.00

C. Julie Blatty
 Full Name (Last, First, Middle Initial)
 Mailing Address 7018 Longwood Drive
 City State Zip Code
 Bethesda MD 20817-2118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Homemaker Homemaker
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2012
Transaction ID : SA11AI.9191
 Amount of Each Receipt this Period
 1500.00

SUBTOTAL of Receipts This Page (optional).....▶	2750.00
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 7 OF 46
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

Full Name (Last, First, Middle Initial) A. Catherine J. Breckel		Date of Receipt 10 / 13 / 2012 Transaction ID : SA11AI.9136
Mailing Address 379 Circlewood Lane		Amount of Each Receipt this Period 250.00
City Cincinnati	State OH	Zip Code 45215-4108
FEC ID number of contributing federal political committee. C	Name of Employer Retired	Occupation Pharmacist
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Patricia Brossard		Date of Receipt 10 / 17 / 2012 Transaction ID : SA11AI.9189
Mailing Address P. O. Box 160		Amount of Each Receipt this Period 500.00
City Ringwood	State IL	Zip Code 60072
FEC ID number of contributing federal political committee. C	Name of Employer Lester Brossard Co.	Occupation Director
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Deborah Cheatham		Date of Receipt 10 / 03 / 2012 Transaction ID : SA11AI.7453
Mailing Address 5202 East Turquoise Avenue		Amount of Each Receipt this Period 2500.00
City Paradise Valley	State AZ	Zip Code 85253-1041
FEC ID number of contributing federal political committee. C	Name of Employer Freedom Mortgage	Occupation Mortgage Banker
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional).....▶	3250.00
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 8 OF 46
	<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	

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

A. John Collier
Full Name (Last, First, Middle Initial)

Mailing Address 7023 Montrose Road

City Birmingham State AL Zip Code 35242-7261

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

Name of Employer Self-Employed Occupation Dentist

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
10 / 03 / 2012
Transaction ID : SA11AI.7429

Amount of Each Receipt this Period
250.00

B. John Collier
Full Name (Last, First, Middle Initial)

Mailing Address 7023 Montrose Road

City Birmingham State AL Zip Code 35242-7261

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

Name of Employer Self-Employed Occupation Dentist

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
10 / 10 / 2012
Transaction ID : SA11AI.8967

Amount of Each Receipt this Period
100.00

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

Mailing Address 656 Waters Edge Drive

City Penhook State VA Zip Code 24137-5002

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

Name of Employer Uttermost Occupation President

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
10 / 05 / 2012
Transaction ID : SA11AI.8366

Amount of Each Receipt this Period
250.00

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: (check only one)	PAGE 9 OF 46
	<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	

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

A. Susan DeConcini
Full Name (Last, First, Middle Initial)
Mailing Address 6014 Chesterbrook Road
City McLean State VA Zip Code 22101-3210
FEC ID number of contributing federal political committee. **C**
Name of Employer Ten Place LLC Occupation Property Management
Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 03 / 2012
Transaction ID : SA11AI.7439
Amount of Each Receipt this Period
500.00

B. Sharon Delisle
Full Name (Last, First, Middle Initial)
Mailing Address 435 Wright Avenue
City Morgan Hill State CA Zip Code 95037
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Sales
Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2012
Transaction ID : SA11AI.8370
Amount of Each Receipt this Period
300.00

C. Keith Dunavant
Full Name (Last, First, Middle Initial)
Mailing Address 1937 Spinnaker Lane
City Azle State TX Zip Code 76020-4937
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Health Care
Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 10 / 2012
Transaction ID : SA11AI.8991
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00
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 10 OF 46
(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)
Women Speak Out PAC

A. Sean Fieler
Full Name (Last, First, Middle Initial)
Mailing Address 40 Haslet Avenue
City Princeton State NJ Zip Code 08540-4914
FEC ID number of contributing federal political committee. **C**
Name of Employer Chiaroscuro Foundation Occupation President
Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 75000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 11 / 2012
Transaction ID : SA11AI.9083
Amount of Each Receipt this Period
75000.00

B. Janet Gambino
Full Name (Last, First, Middle Initial)
Mailing Address 128 Cockonoe Avenue
City Babylon State NY Zip Code 11702-1904
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 02 / 2012
Transaction ID : SA11AI.4561
Amount of Each Receipt this Period
250.00

C. Peter Gennuso
Full Name (Last, First, Middle Initial)
Mailing Address 1301 South Point Ct
City Schuamburg State IL Zip Code 60193
FEC ID number of contributing federal political committee. **C**
Name of Employer Gennuso Financial Group Occupation CFP
Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2012
Transaction ID : SA11AI.8368
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75500.00
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 46
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

A. Doug Grane
 Full Name (Last, First, Middle Initial)
 Mailing Address 1527 Brookhaven Drive
 City McLean State VA Zip Code 22101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Raptor Strategies LLC Occupation COO/CFO
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2012
Transaction ID : SA11AI.8997
 Amount of Each Receipt this Period
 1000.00

B. Sherry Green
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 East 9th Street
 City Hinsdale State IL Zip Code 60521-4523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Homemaker Occupation Homemaker
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2012
Transaction ID : SA11AI.8993
 Amount of Each Receipt this Period
 250.00

C. Andrea Hansen
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 154
 City Carversville State PA Zip Code 18913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Dry Stone Mason
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2012
Transaction ID : SA11AI.7357
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00
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 12 OF 46
	<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	

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

A. James Hildebrand
Full Name (Last, First, Middle Initial)

Mailing Address 7677 Green Garland Drive

City Springfield State VA Zip Code 22153

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

Name of Employer Occupation
IBM Consultant

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 03 / 2012
Transaction ID : SA11AI.7449

Amount of Each Receipt this Period
1000.00

B. Inell Hollar
Full Name (Last, First, Middle Initial)

Mailing Address 1905 Alsace Lane SW

City Marietta State GA Zip Code 30008

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 ▼
350.00

Date of Receipt
10 / 14 / 2012
Transaction ID : SA11AI.9148

Amount of Each Receipt this Period
350.00

C. Mary Alice Johnson
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1506

City Mukilteo State WA Zip Code 98275-7706

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

Name of Employer Occupation
Retired Teacher

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
10 / 04 / 2012
Transaction ID : SA11AI.8161

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1550.00

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 13 OF 46
	<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

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

A. Angeli Kolhatkar
Full Name (Last, First, Middle Initial)
Mailing Address 376 Broadway PH2
City New York State NY Zip Code 10013
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 ▼ 201.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 03 / 2012
Transaction ID : SA11AI.7425
Amount of Each Receipt this Period
201.00

B. Arlyn Lanting
Full Name (Last, First, Middle Initial)
Mailing Address 26407 Brick Lane
City Bonita Springs State FL Zip Code 34134
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 ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 03 / 2012
Transaction ID : SA11AI.7437
Amount of Each Receipt this Period
500.00

C. Kimberlee Leber
Full Name (Last, First, Middle Initial)
Mailing Address 17009-5 E. Darleen Dr.
City Leander State TX Zip Code 78641
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Singer/Songwriter
Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2012
Transaction ID : SA11AI.8372
Amount of Each Receipt this Period
800.00

SUBTOTAL of Receipts This Page (optional).....▶	1501.00
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 14 OF 46
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

A. George Loegering
Full Name (Last, First, Middle Initial)

Mailing Address 15970 35th Street Southeast

City Casselton State ND Zip Code 58012-9737

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 ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : SA11AI.9193

Amount of Each Receipt this Period
 2500.00

B. Marilyn Loegering
Full Name (Last, First, Middle Initial)

Mailing Address 15970 35th ST SE

City Casselton State ND Zip Code 58012

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 ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : SA11AI.9195

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 1410 Tierra Berienda

City Pueblo State CO Zip Code 81008-1789

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

Name of Employer Retired Occupation Realtor

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2012

Transaction ID : SA11AI.7443

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00

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 15 OF 46
	<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)
Women Speak Out PAC

A. Robert Maginn
Full Name (Last, First, Middle Initial)

Mailing Address 101 Huntington Ave Suite 2205

City Boston	State MA	Zip Code 02199
----------------	-------------	-------------------

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

Name of Employer Jenzabar	Occupation CEO
------------------------------	-------------------

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
10 / 03 / 2012
Transaction ID : SA11AI.7427

Amount of Each Receipt this Period
250.00

B. Lucille G. Maloney
Full Name (Last, First, Middle Initial)

Mailing Address 1608 Mary Ellen Court

City Mc Lean	State VA	Zip Code 22101-5023
-----------------	-------------	------------------------

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

Name of Employer Homemaker	Occupation Homemaker
-------------------------------	-------------------------

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 04 / 2012
Transaction ID : SA11AI.8165

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1815 Bayard Avenue

City Saint Paul	State MN	Zip Code 55116-1437
--------------------	-------------	------------------------

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

Name of Employer McCann Periodontics	Occupation Homemaker
---	-------------------------

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
10 / 03 / 2012
Transaction ID : SA11AI.7455

Amount of Each Receipt this Period
3500.00

SUBTOTAL of Receipts This Page (optional).....▶	4750.00
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 16 OF 46
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

A. Ann McDonald
 Full Name (Last, First, Middle Initial)
 Mailing Address 2358 Field Stone Ct
 City Mendota Heights State MN Zip Code 55120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Homemaker Occupation Homemaker
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2012
Transaction ID : SA11AI.8456
 Amount of Each Receipt this Period
 500.00

B. Charles McLaren
 Full Name (Last, First, Middle Initial)
 Mailing Address 7900 International Drive Suite 105
 City Bloomington State MN Zip Code 55425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BPS Capital Occupation President
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2012
Transaction ID : SA11AI.7441
 Amount of Each Receipt this Period
 500.00

C. Karen Mitts
 Full Name (Last, First, Middle Initial)
 Mailing Address 608 Haskin
 City San Antonio State TX Zip Code 78209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Homemaker Occupation Homemaker
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2012
Transaction ID : SA11AI.7435
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
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 17 OF 46
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

Full Name (Last, First, Middle Initial)
A. Laurie Nunnery

Mailing Address 207 Fairwinds Drive

City State Zip Code
Cary NC 27518-9794

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

Name of Employer Occupation
Carolina Country Club Controller

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2012
Transaction ID : SA11AI.8488

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Jeff Rowbotham

Mailing Address 1030 68th Street Unit 1

City State Zip Code
West Des Moines IA 50266-5782

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

Name of Employer Occupation
FEMA Dis Assist Employee

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
 10 / 11 / 2012
Transaction ID : SA11AI.9081

Amount of Each Receipt this Period
300.00

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

Mailing Address 4501 Taylor Road

City State Zip Code
Fort Wayne IN 46804-1915

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2012
Transaction ID : SA11AI.8995

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00

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 18 OF 46
	<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	

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

A. Jerome Schutzman
Full Name (Last, First, Middle Initial)

Mailing Address 2108 Wexford Lane

City Ft. Mitchell State KY Zip Code 41017

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

Name of Employer St. Elizabeth Physician Occupation Mecical Doctor

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2012

Transaction ID : SA11AI.8376

Amount of Each Receipt this Period
5000.00

B. Susan B. Anthony List, Inc.
Full Name (Last, First, Middle Initial)

Mailing Address 1707 L Street NW Ste 550

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 01 / 2012

Transaction ID : SA11AI.4249

Amount of Each Receipt this Period
300000.00

Contribution

C. Susan B. Anthony List, Inc.
Full Name (Last, First, Middle Initial)

Mailing Address 1707 L Street NW Ste 550

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 01 / 2012

Transaction ID : SA11AI.9204

Amount of Each Receipt this Period
30000.00

In-kind -Email List

SUBTOTAL of Receipts This Page (optional).....▶	335000.00
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 19 OF 46
	<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

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NAME OF COMMITTEE (In Full)
Women Speak Out PAC

Full Name (Last, First, Middle Initial)
A. Susan B. Anthony List, Inc.

Mailing Address 1707 L Street NW Ste 550

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2012

Transaction ID : SA11AI.4250

Amount of Each Receipt this Period
75000.00

Contribution

Full Name (Last, First, Middle Initial)
B. Susan B. Anthony List, Inc.

Mailing Address 1707 L Street NW Ste 550

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
407300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2012

Transaction ID : SA11AI.4251

Amount of Each Receipt this Period
2200.00

Contribution

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

Mailing Address PO Box 366382

City San Juan State PR Zip Code 00936

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

Name of Employer Occupation
None Investments

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2012

Transaction ID : SA11AI.7445

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 77700.00

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 20 OF 46
<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)
Women Speak Out PAC

A. Louann Voss
Full Name (Last, First, Middle Initial)
Mailing Address 9600 Mill Hill Lane
City St. Louis State MO Zip Code 63127
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
10 / 03 / 2012
Transaction ID : SA11AI.7433
Amount of Each Receipt this Period
300.00

B. John Warner
Full Name (Last, First, Middle Initial)
Mailing Address 50 Ferncroft Park
City Ramsey State NJ Zip Code 07446
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Real Estate Manager
Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
10 / 03 / 2012
Transaction ID : SA11AI.7431
Amount of Each Receipt this Period
250.00

C. Linda Worden
Full Name (Last, First, Middle Initial)
Mailing Address 1208 Barbara Ann St.
City Kerrville State TX Zip Code 78028
FEC ID number of contributing federal political committee. **C**
Name of Employer H.E.Butt Foundation Occupation Retreat Hostess
Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
10 / 03 / 2012
Transaction ID : SA11AI.7447
Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00
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 21 OF 46
(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)
Women Speak Out PAC

A. Full Name (Last, First, Middle Initial)
Jovan Zepcevski

Mailing Address 7802 Jean Blvd

City Fort Myers State FL Zip Code 33967

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

Name of Employer Zep Construction Inc Occupation Engeneer

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2012

Transaction ID : SA11AI.8374

Amount of Each Receipt this Period
1000.00

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

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	515351.00

**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 Speak Out PAC

Full Name (Last, First, Middle Initial)

A. Emily Buchanan

Mailing Address 1707 L St NW
Ste 550

City Washington State DC Zip Code 20036

Purpose of Disbursement
Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 12 / 2012

Transaction ID : SB21B.9201

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Campaign Solutions

Mailing Address 117 N Saint Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Website

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2012

Transaction ID : SB21B.4233

Amount of Each Disbursement this Period

1956.25

Full Name (Last, First, Middle Initial)

C. Campaign Solutions

Mailing Address 117 N Saint Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Donation Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 05 / 2012

Transaction ID : SB21B.4235

Amount of Each Disbursement this Period

8647.17

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

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

11603.42

**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 Speak Out PAC

Full Name (Last, First, Middle Initial)

A. Campaign Solutions

Mailing Address 117 N Saint Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Donation Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2012

Transaction ID : SB21B.4248

Amount of Each Disbursement this Period

2632.43

Category/
Type

Full Name (Last, First, Middle Initial)

B. Capital City Partners

Mailing Address 1100 H Street NW Ste 700

City Washington State DC Zip Code 20005

Purpose of Disbursement
Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 12 / 2012

Transaction ID : SB21B.9203

Amount of Each Disbursement this Period

1000.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. Marjorie Dannenfelser

Mailing Address 1707 L Street NW Ste 550

City Washington State DC Zip Code 20036

Purpose of Disbursement
Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 12 / 2012

Transaction ID : SB21B.9200

Amount of Each Disbursement this Period

1000.00

Category/
Type

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

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

4632.43

**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 Speak Out PAC

Full Name (Last, First, Middle Initial)

A. Jennifer Gross

Mailing Address 1707 L Street NW
Ste 550

City Washington State DC Zip Code 20036

Purpose of Disbursement
Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 12 / 2012

Transaction ID : SB21B.9202

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mallory Quigley

Mailing Address 1707 L Street NW
Ste 550

City Washington State DC Zip Code 20036

Purpose of Disbursement
Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 12 / 2012

Transaction ID : SB21B.9198

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Amanda Robey

Mailing Address 1707 L Street NW
Ste 550

City Washington State DC Zip Code 20036

Purpose of Disbursement
Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 12 / 2012

Transaction ID : SB21B.9196

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

**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

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 Speak Out PAC

Full Name (Last, First, Middle Initial)
A. Shirley & Banister Public Affairs

Date of Disbursement: MM / DD / YYYY
10 / 12 / 2012

Mailing Address 122 S Patrick Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Media Consulting

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID : **SB21B.4253**

Amount of Each Disbursement this Period
3000.00

Full Name (Last, First, Middle Initial)
B. Susan B. Anthony List, Inc.

Date of Disbursement: MM / DD / YYYY
10 / 01 / 2012

Mailing Address 1707 L Street NW Ste 550

City Washington State DC Zip Code 20036

Purpose of Disbursement In-kind -Email List

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID : **SB21B.9205**

Amount of Each Disbursement this Period
30000.00

Full Name (Last, First, Middle Initial)
C. Susan B. Anthony List, Inc.

Date of Disbursement: MM / DD / YYYY
10 / 12 / 2012

Mailing Address 1707 L Street NW Ste 550

City Washington State DC Zip Code 20036

Purpose of Disbursement Admin Expenses

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID : **SB21B.4256**

Amount of Each Disbursement this Period
429.45

SUBTOTAL of Disbursements This Page (optional)..... ▶ 33429.45

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)

<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 Speak Out PAC

Full Name (Last, First, Middle Initial)

A. Billy Valentine

Mailing Address 1707 L St NW
Ste 550

City Washington State DC Zip Code 20036

Purpose of Disbursement
Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 12 / 2012

Transaction ID : SB21B.9197

Amount of Each Disbursement this Period

1000.00

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

1000.00

53665.30

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Design 4 Marketing Communications		Date <div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 10 / 03 / 2012 </div>
Mailing Address 106 North Collins St		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 80229.00 </div>
City State Zip Code Plant City FL 33563	Transaction ID : SE.4120	
Purpose of Expenditure Ads		Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 241935.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee Design 4 Marketing Communications		Date <div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 10 / 03 / 2012 </div>
Mailing Address 106 North Collins St		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 28200.00 </div>
City State Zip Code Plant City FL 33563	Transaction ID : SE.4126	
Purpose of Expenditure Ads		Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 270135.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 108429.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 108429.00 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Emily Buchanan
 Signature

[Electronically Filed]

Date 01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Design 4 Marketing Communications		Date <div style="border: 1px solid black; padding: 2px;"> 10 / 03 / 2012 </div>
Mailing Address 106 North Collins St		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 122150.00 </div>
City State Zip Code Plant City FL 33563		
Purpose of Expenditure Ads	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 392285.35 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4127

Full Name (Last, First, Middle Initial) of Payee Design 4 Marketing Communications		Date <div style="border: 1px solid black; padding: 2px;"> 10 / 03 / 2012 </div>
Mailing Address 106 North Collins St		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 21230.00 </div>
City State Zip Code Plant City FL 33563		
Purpose of Expenditure Ads	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 413515.35 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4136

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 143380.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Emily Buchanan

[Electronically Filed]

Date

01 /
 31 /
 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼ C C00530766
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Design 4 Marketing Communications		Date MM / DD / YYYY 10 / 04 / 2012
Mailing Address 106 North Collins St		Amount 26930.00
City Plant City	State FL	
Zip Code 33563		Transaction ID : SE.4122
Purpose of Expenditure Ads	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 440904.18		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee Design 4 Marketing Communications		Date MM / DD / YYYY 10 / 04 / 2012
Mailing Address 106 North Collins St		Amount 105070.00
City Plant City	State FL	
Zip Code 33563		Transaction ID : SE.4123
Purpose of Expenditure Ads	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 545974.18		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	132000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Emily Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **01 / 31 / 2013**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Design 4 Marketing Communications		Date <div style="border: 1px solid black; padding: 2px;"> 10 / 11 / 2012 </div>
Mailing Address 106 North Collins St		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 157000.00 </div>
City State Zip Code Plant City FL 33563	Transaction ID : SE.4163	
Purpose of Expenditure Ads	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 708662.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee Design 4 Marketing Communications		Date <div style="border: 1px solid black; padding: 2px;"> 10 / 11 / 2012 </div>	
Mailing Address 106 North Collins St		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 13950.00 </div>	
City State Zip Code Plant City FL 33563		Transaction ID : SE.4164	
Purpose of Expenditure Ads	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 722612.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 170950.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Emily Buchanan

[Electronically Filed]

Date

01 /
 31 /
 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Design 4 Marketing Communications		Date <div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2012 </div>
Mailing Address 106 North Collins St		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 9641.05 </div>
City Plant City State FL Zip Code 33563		
Purpose of Expenditure Ad Production, orig reptd as \$9526.25	Category/Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 735077.58 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4231

Full Name (Last, First, Middle Initial) of Payee Enterprise Rent A Car		Date <div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 4600 International Gtwy		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 480.32 </div>
City Columbus State OH Zip Code 43219		
Purpose of Expenditure Rental Car	Category/Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 725308.88 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.9361

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 10121.37 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 10121.37 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Emily Buchanan

Signature _____ [Electronically Filed] Date
M M M / D D D / Y Y Y Y Y Y
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Fed Ex	Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 10 / 2012 </div>
Mailing Address 1612 K St NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 12.99 </div>
City Washington State DC Zip Code 20036	Transaction ID : SE.4187
Purpose of Expenditure Podium Sign	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 550871.74	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2012 <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee Fed Ex	Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 10 / 2012 </div>
Mailing Address 1612 K St NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 12.99 </div>
City Washington State DC Zip Code 20036	Transaction ID : SE.4189
Purpose of Expenditure Podium Sign	Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 550884.73	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2012 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 25.98 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Emily Buchanan

Signature _____ [Electronically Filed] Date 01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼ C C00530766
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Galaxy Cab		Date MM / DD / YYYY 10 / 10 / 2012
Mailing Address 318 North Arch Rd Ste 100-B		Amount 12.00
City Richmond	State VA	
Zip Code 23236		Transaction ID : SE.4210
Purpose of Expenditure Cab	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 551071.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Hyatt Place Richmond		Date MM / DD / YYYY 10 / 10 / 2012
Mailing Address 4401 S Laburnum Ave		Amount 291.22
City Richmond	State VA	
Zip Code 23231		Transaction ID : SE.4174
Purpose of Expenditure Hotel	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 548746.15		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	303.22
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Emily Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **01 / 31 / 2013**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼ C C00530766
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee O'Hare International Airport		Date M M / D D / Y Y Y Y Y Y 10 / 10 / 2012
Mailing Address P.O. Box 66179		Amount 57.00
City Chicago	State IL	
Zip Code 60666	Transaction ID : SE.4215	
Purpose of Expenditure Parking	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 551197.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee Paramount Communications Group		Date M M / D D / Y Y Y Y Y Y 10 / 02 / 2012
Mailing Address 525-K East Market Street #114		Amount 515.35
City Leesburg	State VI	
Zip Code 20176	Transaction ID : SE.9355	
Purpose of Expenditure Email Communication	Category/ Type 	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 515.35		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	572.35
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Emily Buchanan

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Paramount Communications Group		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 09 / 2012 </div>
Mailing Address 525-K East Market Street #114		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 508.95 </div>
City Leesburg State VI Zip Code 20176		
Purpose of Expenditure Email Communication	Category/Type 	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 546996.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.9359

Full Name (Last, First, Middle Initial) of Payee Paramount Communications Group		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 10 / 2012 </div>
Mailing Address 525-K East Market Street #114		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 464.64 </div>
City Leesburg State VI Zip Code 20176		
Purpose of Expenditure Email Communication	Category/Type 	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 551662.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.9360

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 973.59 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Emily Buchanan

Signature _____ [Electronically Filed] Date 01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Starbucks		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 10 / 2012 </div>
Mailing Address 5501 RC Josh Birmingham Pkwy		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 20.19 </div>
City Charlotte State NC Zip Code 28208	Transaction ID : SE.4191	
Purpose of Expenditure Meals	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> 002 </div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 550979.92 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee Statehouse Parking Garage		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 11 / 2012 </div>
Mailing Address 1 Capital Sq		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 4.00 </div>
City Columbus State OH Zip Code 43215	Transaction ID : SE.4206	
Purpose of Expenditure Parking	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> 002 </div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 722616.36 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 24.19 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Emily Buchanan

Signature _____ [Electronically Filed] Date

M M / D D / Y Y Y Y Y Y
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Staybridge Suites		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 10 / 2012 </div>
Mailing Address 2890 Airport Dr		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 452.10 </div>
City Columbus State OH Zip Code 43219		
Purpose of Expenditure Hotel	Category/Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 550858.75		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4182

Full Name (Last, First, Middle Initial) of Payee Subway		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 10 / 2012 </div>
Mailing Address 1425 Cassidy Ave		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 29.80 </div>
City Columbus State OH Zip Code 43219		
Purpose of Expenditure Meals	Category/Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 551009.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4193

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 481.90 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 481.90 </div>

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Emily Buchanan
 Signature [Electronically Filed] Date

M M / D D / Y Y Y Y Y Y
01 / 31 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼ C C00530766
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee United Airlines		Date MM / DD / YYYY 10 / 10 / 2012
Mailing Address 77 West Wacker Drive		Amount 491.80
City Chicago	State IL	
Zip Code 60601		Transaction ID : SE.4170
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 547488.63		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee United Airlines		Date MM / DD / YYYY 10 / 10 / 2012
Mailing Address 77 West Wacker Drive		Amount 966.30
City Chicago	State IL	
Zip Code 60601		Transaction ID : SE.4173
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 548454.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	1458.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Emily Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **01 / 31 / 2013**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼ C C00530766
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee United Airlines		Date MM / DD / YYYY 10 / 10 / 2012
Mailing Address 77 West Wacker Drive		Amount 25.00
City Chicago	State IL	
Zip Code 60601	Transaction ID : SE.4209	
Purpose of Expenditure Bag Fee	Category/Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 551059.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee US Airways		Date MM / DD / YYYY 10 / 10 / 2012
Mailing Address 4000 E Sky Harbor Blvd		Amount 332.10
City Phoenix	State AZ	
Zip Code 85034	Transaction ID : SE.4179	
Purpose of Expenditure Flight	Category/Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 549078.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	357.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Emily Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **01 / 31 / 2013**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼ C C00530766
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee US Airways		Date MM / DD / YYYY 10 / 10 / 2012
Mailing Address 4000 E Sky Harbor Blvd		Amount 1328.40
City Phoenix	State AZ	
Zip Code 85034	Transaction ID : SE.4181	
Purpose of Expenditure Flight	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 550406.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee US Airways		Date MM / DD / YYYY 10 / 10 / 2012
Mailing Address 4000 E Sky Harbor Blvd		Amount 75.00
City Phoenix	State AZ	
Zip Code 85034	Transaction ID : SE.4190	
Purpose of Expenditure Bag Fee	Category/ Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 550959.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1403.40
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Emily Buchanan

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼ C C00530766
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee US Airways		Date MM / DD / YYYY 10 / 10 / 2012
Mailing Address 4000 E Sky Harbor Blvd		Amount 25.00
City Phoenix	State AZ	
Zip Code 85034	Transaction ID : SE.4208	
Purpose of Expenditure Bag Fee	Category/Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 551034.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee US Airways		Date MM / DD / YYYY 10 / 12 / 2012
Mailing Address 4000 E Sky Harbor Blvd		Amount 589.20
City Phoenix	State AZ	
Zip Code 85034	Transaction ID : SE.4201	
Purpose of Expenditure FLIGHT	Category/Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 723205.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	614.20
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Emily Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **01 / 31 / 2013**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Women Speak Out PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00530766 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee US Airways		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 12 / 2012 </div>
Mailing Address 4000 E Sky Harbor Blvd		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 1623.00 </div>
City Phoenix State AZ Zip Code 85034		
Purpose of Expenditure Airfare	Category/Type 002	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 724828.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4217

Full Name (Last, First, Middle Initial) of Payee		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y </div>
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
City State Zip Code		
Purpose of Expenditure	Category/Type 	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 1623.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 735077.58 </div>

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Emily Buchanan

Signature

[Electronically Filed]

Date

01 / 31 / 2013