

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. 12FE4M5

WOMEN VOTE!

ADDRESS (number and street) 1800 M Street, NW Ste 375N Washington DC 20036

Check if different than previously reported. (ACC)

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

C C00473918

3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) [] 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: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11) (Non-Election Year Only), Dec 20 (M12) (Non-Election Year Only), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 12 / 01 / 2013 through 12 / 31 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Caroline Fines

Signature of Treasurer Caroline Fines [Electronically Filed] Date 01 / 31 / 2014

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 table with 10 columns and 1 row. FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

WOMEN VOTE!

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		<input type="text" value="190671.11"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="417726.05"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="78815.00"/>	<input type="text" value="1193648.41"/>
(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="496541.05"/>	<input type="text" value="1384319.52"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="103532.49"/>	<input type="text" value="991310.96"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="393008.56"/>	<input type="text" value="393008.56"/>
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)

Write or Type Committee Name

WOMEN VOTE!

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).....	77725.00	646598.06
(ii) Unitemized	1090.00	4822.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	78815.00	651420.06
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	85000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	78815.00	736420.06
12. Transfers From Affiliated/Other Party Committees.....	0.00	450000.00
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	322.35
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	6906.00
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))..... ▶	78815.00	1193648.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	78815.00	1193648.41

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	103532.49	450854.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	103532.49	450854.08
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)	0.00	140406.88
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	50.00
(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	50.00
29. Other Disbursements	0.00	400000.00
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)) ..	103532.49	991310.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	103532.49	991310.96

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)	78815.00	736420.06
34. Total Contribution Refunds (from Line 28(d))	0.00	50.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	78815.00	736370.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	103532.49	450854.08
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	322.35
38. Net Operating Expenditures (subtract Line 37 from Line 36)	103532.49	450531.73

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

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

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

NAME OF COMMITTEE (In Full)
WOMEN VOTE!

Full Name (Last, First, Middle Initial)
A. Amy Gross

Mailing Address 1017 N. Phelps Avenue

City Winter Park State FL Zip Code 32789

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

Name of Employer TMI Occupation Attorney

Receipt For:
 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
 12 / 05 / 2013

Transaction ID : 3816168

Amount of Each Receipt this Period
 250.00

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

Mailing Address 1107 S. Fernandez Ave

City Arlington Heigts State IL Zip Code 60005

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

Name of Employer Cvs Caremark Occupation Vp, Prescription Benefit Mgmt

Receipt For:
 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
 12 / 05 / 2013

Transaction ID : 3816797

Amount of Each Receipt this Period
 250.00

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

Mailing Address 700 Coral Way Apt. No. 3

City Coral Gables State FL Zip Code 33134

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2013

Transaction ID : 3819888

Amount of Each Receipt this Period
 50000.00

SUBTOTAL of Receipts This Page (optional).....▶	50500.00
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 12
	<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 VOTE!

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

Mailing Address 1074 Berkshire Rd. NE

City Atlanta State GA Zip Code 30306

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

Name of Employer Self-Employed Occupation Investor

Receipt For:
 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
 12 / 16 / 2013
Transaction ID : 3824186

Amount of Each Receipt this Period
 5000.00

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

Mailing Address 1424 Miravalle Ave

City Los Altos State CA Zip Code 94024

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

Name of Employer Self Occupation Tax Consultant

Receipt For:
 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
 12 / 19 / 2013
Transaction ID : 3827432

Amount of Each Receipt this Period
 25.00

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

Mailing Address 48 W. 88th St

City New York State NY Zip Code 10024

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

Name of Employer REQUESTED Occupation REQUESTED

Receipt For:
 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
 12 / 20 / 2013
Transaction ID : 3838816

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	6025.00
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 12
	<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 VOTE!

Full Name (Last, First, Middle Initial) A. Margaret Loeb		Date of Receipt
Mailing Address 15 Central Park West PH 39		<input type="text" value="12"/> / <input type="text" value="24"/> / <input type="text" value="2013"/>
City New York	State NY	Zip Code 10023
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3836802
Name of Employer REQUESTED	Occupation REQUESTED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="15000.00"/>
	<input type="text" value="15000.00"/>	

Full Name (Last, First, Middle Initial) B. Judy Honig		Date of Receipt
Mailing Address 9911 De Paul Drive		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City Bethesda	State MD	Zip Code 20817
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3832157
Name of Employer Lapine Group	Occupation Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) C. Tami Hoag		Date of Receipt
Mailing Address 11812 San Vicente Blvd. Fl 4		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City Los Angeles	State CA	Zip Code 90049
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : 3835526
Name of Employer Self Employed	Occupation Writer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="5000.00"/>
	<input type="text" value="7500.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="21000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 9 OF 12
(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 VOTE!

A. Kalik and Associates Inc
Full Name (Last, First, Middle Initial)
Mailing Address 10291 Arizona Circle
City Bethesda State MD Zip Code 20817
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 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
12 / 12 / 2013
Transaction ID : 3839194
Amount of Each Receipt this Period
100.00

B. MGB Development LLC
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 15748
City Washington State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 18 / 2013
Transaction ID : 3826931
Amount of Each Receipt this Period
100.00

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 M / D D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	77725.00

**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 VOTE!

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address 808 East Utah Valley Drive

City American Fork State UT Zip Code 84003

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 03 / 2013

Transaction ID : SB21B-394

Amount of Each Disbursement this Period

81.25

Full Name (Last, First, Middle Initial)

B. First Data Merchant Services

Mailing Address PO Box 6010

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 03 / 2013

Transaction ID : SB21B-393

Amount of Each Disbursement this Period

328.91

Full Name (Last, First, Middle Initial)

C. Peter D. Hart Research

Mailing Address 1724 Connecticut Ave, NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Polling/Surveys

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 05 / 2013

Transaction ID : SB21B-390

Amount of Each Disbursement this Period

83000.00

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

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

83410.16

**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 VOTE!

Full Name (Last, First, Middle Initial)

A. Campaign Team, Inc. c/o Anna Lidman

Mailing Address 37 Brookview Terrace

City Portland State ME Zip Code 04102

Purpose of Disbursement
Travel/Accommodation /Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 05 / 2013

Transaction ID : SB21B-389

Amount of Each Disbursement this Period

615.57

Full Name (Last, First, Middle Initial)

B. GBA Strategies

Mailing Address 1901 L St NW
Suite 702

City Washington State DC Zip Code 20036

Purpose of Disbursement
Polling/Surveys

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 12 / 2013

Transaction ID : SB21B-391

Amount of Each Disbursement this Period

4500.00

Full Name (Last, First, Middle Initial)

C. Blackbaud Merchant Services

Mailing Address 2000 Daniel Island Drive

City Charleston State SC Zip Code 29492

Purpose of Disbursement
Credit Card Service Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 13 / 2013

Transaction ID : SB21B-395

Amount of Each Disbursement this Period

6.76

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

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

5122.33

**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 VOTE!

Full Name (Last, First, Middle Initial)

A. Campaign Team, Inc. c/o Anna Lidman

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2013

Mailing Address 37 Brookview Terrace

Transaction ID : SB21B-392

City Portland State ME Zip Code 04102

Amount of Each Disbursement this Period

15000.00

Purpose of Disbursement
Consulting Fundraising

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

15000.00

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

103532.49
