

**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 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 checked="" 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									
-----------------	--	--	--	--	--	--	--	--	--

**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="70042.92"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="65231.00"/>	<input type="text" value="926366.08"/>
(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="135273.92"/>	<input type="text" value="926366.08"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="114478.20"/>	<input type="text" value="905570.36"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="20795.72"/>	<input type="text" value="20795.72"/>
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 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).....	63550.00	828901.00
(ii) Unitemized	1681.00	97465.08
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	65231.00	926366.08
(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)	65231.00	926366.08
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))..... ▶	65231.00	926366.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	65231.00	926366.08

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	6196.88	62211.46
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6196.88	62211.46
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)	108281.32	843358.90
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)) ..	114478.20	905570.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	114478.20	905570.36

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)	65231.00	926366.08
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	65231.00	926366.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6196.88	62211.46
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6196.88	62211.46

**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 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

Full Name (Last, First, Middle Initial)
A. Mark Barclay

Mailing Address 3215 West US Highway 136

City State Zip Code
Crawfordsville IN 47933-8540

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

Name of Employer Occupation
Self-Employed Farmer

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 / 18 / 2012

Transaction ID : SA11AI.9242

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Vernon & Sandra Buchanan

Mailing Address 788 W Dr Martin Luther King Jr Blv

City State Zip Code
Seffner FL 33584-4534

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

Name of Employer Occupation
Self-Employed Auto-Dealer

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 / 25 / 2012

Transaction ID : SA11AI.9288

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. James S. Fennell Jr.

Mailing Address 6960 Killarney Drive

City State Zip Code
Beaumont TX 77706-4116

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

Name of Employer Occupation
ExxonMobil Retired Process Safety Engineer

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2012

Transaction ID : SA11AI.9308

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

A. Elizabeth Ferguson
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Jersey Avenue
 City Spring Lake State NJ Zip Code 07762-1407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Flavors Occupation Executive
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2012
Transaction ID : SA11AI.9280
 Amount of Each Receipt this Period
 2500.00

B. Thomas G. Ferguson
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Jersey Avenue
 City Spring Lake State NJ Zip Code 07762-1407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Commonhealth Main Occupation Retired
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2012
Transaction ID : SA11AI.9268
 Amount of Each Receipt this Period
 2500.00

C. Daniel Flatley
 Full Name (Last, First, Middle Initial)
 Mailing Address 38 Youngs Rd
 City Basking Ridge State NJ Zip Code 07920-4033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Masthend Venture Partners Occupation Venture Capital
 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 / 22 / 2012
Transaction ID : SA11AI.9266
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 8 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

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

Mailing Address 1650 Nottingham Drive

City Hummelstown State PA Zip Code 17036-8712

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

Name of Employer Penn State Hershey Medical Center Occupation Neurosurgeon

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 / 24 / 2012
Transaction ID : SA11AI.9286

Amount of Each Receipt this Period
500.00

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

Mailing Address 53 High Street

City Summit State NJ Zip Code 07901-1826

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

Name of Employer Info Requested Occupation Info Requested

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 / 31 / 2012
Transaction ID : SA11AI.9304

Amount of Each Receipt this Period
500.00

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

Mailing Address 2139 State Route 35

City Holmdel State NJ Zip Code 07733-1094

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

Name of Employer Harris FRC Corporation Occupation Info Requested

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 / 22 / 2012
Transaction ID : SA11AI.9270

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00

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 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Thomas G. Mahala
 Full Name (Last, First, Middle Initial)
 Mailing Address 51 Layton Rd
 City Far Hills State NJ Zip Code 07931-2536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BNP Occupation Financial Services
 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 / 22 / 2012
Transaction ID : SA11AI.9264
 Amount of Each Receipt this Period
 500.00

B. George McAndrews
 Full Name (Last, First, Middle Initial)
 Mailing Address 1490 Lake Shore Dr. S
 City Barrington State IL Zip Code 60010-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer McAndrews Held Mallox Occupation Lawyer
 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 / 19 / 2012
Transaction ID : SA11AI.9250
 Amount of Each Receipt this Period
 1000.00

C. P. J. McMorrow
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 Alston Court
 City Red Bank State NJ Zip Code 07701-2343
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2012
Transaction ID : SA11AI.9260
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
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 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

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

Mailing Address 337 Michalewicz Road

City State Zip Code
Best TX 76932-8109

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

Name of Employer Occupation
Self-Employed Volunteer for Arlington County and St

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 / /
 10 / 19 / 2012
Transaction ID : SA11AI.9248

Amount of Each Receipt this Period
500.00

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

Mailing Address 171 Jean Circle

City State Zip Code
Chicopee MA 01020-3525

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 ▼
2000.00

Date of Receipt
 / /
 11 / 23 / 2012
Transaction ID : SA11AI.9333

Amount of Each Receipt this Period
2000.00

Full Name (Last, First, Middle Initial)
C. Deanie S. Reis

Mailing Address 7 Greenbriar Drive

City State Zip Code
Saint Louis MO 63124-1819

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
 / /
 10 / 18 / 2012
Transaction ID : SA11AI.9240

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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 11 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Women Speak Out PAC

Full Name (Last, First, Middle Initial)
A. Alan & Mary Rubino

Mailing Address 210 Old Chester Rd

City Essex Fells	State NJ	Zip Code 07021-1516
---------------------	-------------	------------------------

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

Name of Employer Emsphere Direct	Occupation Pharma CEO
-------------------------------------	--------------------------

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 / 22 / 2012
Transaction ID : SA11AI.9262

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
B. Harold C. Simmons

Mailing Address 5430 Lyndon B Johnson Freeway Suit

City Dallas	State TX	Zip Code 75240-2620
----------------	-------------	------------------------

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

Name of Employer Contran Corporation	Occupation CEO
---	-------------------

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **25000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2012
Transaction ID : SA11AI.9276

Amount of Each Receipt this Period
25000.00

Full Name (Last, First, Middle Initial)
c. John D. Stewart

Mailing Address 3670 Northwood Drive

City Memphis	State TN	Zip Code 38111-6140
-----------------	-------------	------------------------

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

Name of Employer Grace - St. Lukes Episcopal School	Occupation Teacher
--	-----------------------

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **8000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.9290

Amount of Each Receipt this Period
8000.00

SUBTOTAL of Receipts This Page (optional).....▶	33300.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 22
(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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. Lisa Tennant
Full Name (Last, First, Middle Initial)
Mailing Address 9912 Mayfield Drive
City Bethesda State MD Zip Code 20817-1652
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 ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 22 / 2012
Transaction ID : SA11AI.9272
Amount of Each Receipt this Period
5000.00

B. Mary Walker
Full Name (Last, First, Middle Initial)
Mailing Address P.O. 325
City Amity State OR Zip Code 97101-0325
FEC ID number of contributing federal political committee. **C**
Name of Employer Mary Walker Occupation Self Employed
Receipt For: 2012
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 22 / 2012
Transaction ID : SA11AI.9274
Amount of Each Receipt this Period
5000.00

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

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	63550.00

**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. Campaign Solutions

Mailing Address 117 N Saint Asaph St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Hosting Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2012

Transaction ID : **SB21B.9346**

Amount of Each Disbursement this Period

150.00

B. Campaign Solutions

Full Name (Last, First, Middle Initial)

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
11 / 05 / 2012

Transaction ID : **SB21B.9349**

Amount of Each Disbursement this Period

160.82

C. Discount Bankcard

Full Name (Last, First, Middle Initial)

Mailing Address 21215 Burbank Blvd Ste 300

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2012

Transaction ID : **SB21B.9343**

Amount of Each Disbursement this Period

152.00

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

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

462.82

**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. Discount Bankcard

Mailing Address 21215 Burbank Blvd
Ste 300

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement
Merchant Fee

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
11			26			2012			

Transaction ID : SB21B.9389

Amount of Each Disbursement this Period

580.03

Full Name (Last, First, Middle Initial)

B. Langdon Law

Mailing Address 8913 Cincinnati-Dayton Rd

City West Chester State OH Zip Code 45069-3131

Purpose of Disbursement
Legal Fees

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
10			29			2012			

Transaction ID : SB21B.9338

Amount of Each Disbursement this Period

2631.00

Full Name (Last, First, Middle Initial)

C. MTOT Disc Bankcard

Mailing Address 21215 Burbank Blvd
Ste 300

City Woodland Hills State CA Zip Code 91367

Purpose of Disbursement
Credit Card Processing

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
11			02			2012			

Transaction ID : SB21B.9347

Amount of Each Disbursement this Period

444.78

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

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

3655.81

--

**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. Susan B. Anthony List, Inc.

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SB21B.9350

Amount of Each Disbursement this Period

1764.36

B.

Full Name (Last, First, Middle Initial)

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

C.

Full Name (Last, First, Middle Initial)

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)..... ▶

1764.36

5882.99

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 Harris Media, LLC		Date MM / DD / YYYY 11 / 02 / 2012
Mailing Address 611 S Congress Ave Ste 400		Amount 25000.00
City Austin State TX Zip Code 78704	Transaction ID : SE.9233	
Purpose of Expenditure Online Advertisint	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 760077.58	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Hickory Printing Solutions		Date MM / DD / YYYY 10 / 31 / 2012
Mailing Address 205 2nd St NW		Amount 16583.88
City Hickory State NC Zip Code 28601	Transaction ID : SE.9216	
Purpose of Expenditure Postage	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: VA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: GEORGE ALLEN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 16583.88	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	41583.88
(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 Hickory Printing Solutions		Date <div style="border: 1px solid black; padding: 2px;"> 10 / 31 / 2012 </div>
Mailing Address 205 2nd St NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 16583.88 </div>
City Hickory State NC Zip Code 28601	Transaction ID : SE.9219	
Purpose of Expenditure Postage	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> 004 </div>	Office Sought: <input type="checkbox"/> House State: VA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY MICHAEL KAINE		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;"> 33167.76 </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 Mail Haus		Date <div style="border: 1px solid black; padding: 2px;"> 10 / 31 / 2012 </div>
Mailing Address 1745 Suburban Dr		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 5394.04 </div>
City De Pere State WI Zip Code 54115	Transaction ID : SE.9207	
Purpose of Expenditure Postage	Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> 004 </div>	Office Sought: <input type="checkbox"/> House State: IN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD E MOURDOCK		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 5394.04 </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;"> 21977.92 </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 <div style="float: right; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M M / D D D / Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Mail Haus		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 1745 Suburban Dr		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">5394.04</div>
City State Zip Code De Pere WI 54115	Transaction ID : SE.9210	
Purpose of Expenditure Postage	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">004</div>	Office Sought: <input type="checkbox"/> House State: IN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOSEPH S DONNELLY		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; display: inline-block; text-align: right;">10788.08</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 The Lukens Company		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y</div>
Mailing Address 2800 Shirlington Rd 9th Floor		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">7617.27</div>
City State Zip Code Arlington VA 22206	Transaction ID : SE.9212	
Purpose of Expenditure Mailers	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: center;">004</div>	Office Sought: <input type="checkbox"/> House State: IN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOSEPH S DONNELLY		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; display: inline-block; text-align: right;">18405.35</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; display: inline-block; text-align: right;">13011.31</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; 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

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

