

**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

WOMENCOUNT PAC

ADDRESS (number and street)

393 7TH AVENUE, SUITE 301

Check if different
than previously
reported. (ACC)

SAN FRANCISCO

CA

94118

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00450098

3. IS THIS
REPORTNEW
(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:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☒ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

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

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

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

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2017

through

M M M / D D D / Y Y Y Y Y Y
07 31 2017

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

Mason, Stacy, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Mason, Stacy, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
08 19 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

WOMENCOUNT PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y
07 / 31 / 2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2017		4706.06
(b) Cash on Hand at Beginning of Reporting Period.....	21028.45	
(c) Total Receipts (from Line 19)	41348.36	300186.77
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	62376.81	304892.83
7. Total Disbursements (from Line 31).....	43023.79	285539.81
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	19353.02	19353.02
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	9986.99	

☒ 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. 05/2016)

Page 3

Write or Type Committee Name

WOMENCOUNT PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		0	1		2	0	1	7		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		3	1		2	0	1	7		

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).....

39650.72

289265.10

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

39650.72

289265.10

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

1697.64

10907.20

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

41348.36

300172.30

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

14.47

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))

41348.36

300186.77

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

41348.36

300186.77

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

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	583.07	12849.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	583.07	12849.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	42440.72	272402.22
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	272.70
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	15.09
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	287.79
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	43023.79	285539.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	43023.79	285539.81

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	41348.36	300172.30
34. Total Contribution Refunds (from Line 28(d))	0.00	287.79
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	41348.36	299884.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	583.07	12849.80
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	583.07	12849.80

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 81

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DE BLANK, MICHELLE, , ,

Mailing Address 1398 FOREST AVENUE

City

PALO ALTO

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

LEGAL AID

Occupation (for Individual)

LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2017

Transaction ID : INCA13320

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEAVER, MARY JANE, , ,

Mailing Address 550 MONTGOMERY STREET, SUITE 650

City

SAN FRANCISCO

State

CA

Zip Code

94111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

WEAVER SCHLENGER LLP

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 03 / 2017

Transaction ID : INCA13321

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ALEXANDER, SUZI, , ,

Mailing Address 461 2ND STREET T660

City

SAN FRANCISCO

State

CA

Zip Code

94107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

ROBBINS GELLER

Occupation (for Individual)

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 06 / 2017

Transaction ID : INCA13322

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

SUBTOTAL of Receipts This Page (optional)..... ►

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

3000.00

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 81

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CRABB, TONY, , ,

Mailing Address 1083 VINE STREET, BOX 249

City
HEALDSBURG

State
CA

Zip Code
95448

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 06 / 2017

Transaction ID : INCA13323

Amount of Each Receipt this Period

2700.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRASSESCHI, BARBARA, , ,

Mailing Address 1083 VINE ST MB249

City
HEALDSBURG

State
CA

Zip Code
95448

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PUMA SPRINGS VINEYARDS

Occupation (for Individual)
FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 06 / 2017

Transaction ID : INCA13324

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KELLEY, ARIEL, , ,

Mailing Address 160 FOSS CREEK CIR #926

City
HEALDSBURG

State
CA

Zip Code
95448

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 06 / 2017

Transaction ID : INCA13325

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

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

4700.00

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 81
(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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SILVER, CHRISTINE, , ,

Mailing Address 2121 BROADWAY #3

City State Zip Code
SAN FRANCISCO CA 94115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 07 / 2017

Transaction ID : INCA13326

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. HARPER, JANE, , ,

Mailing Address 19 RESOLUTION ROAD

City State Zip Code
TRURO MA 02666

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.18

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 12 / 2017

Transaction ID : INCA13327

Amount of Each Receipt this Period

20.18

☐ Memo Item

ERMK: ROSEN FOR NEVADA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. HARPER, JANE, , ,

Mailing Address 19 RESOLUTION ROAD

City State Zip Code
TRURO MA 02666

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

75.18

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 12 / 2017

Transaction ID : INCA13328

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

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

1025.18

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 81

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAZAGA, ROBERT, , ,

Mailing Address 500 PATERSON PLANK ROAD

City
UNION CITY

State
NJ

Zip Code
07087

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RIGHTS INTERNATIONAL GROUP, INC

Occupation (for Individual)

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.18

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 12 / 2017

Transaction ID : INCA13329

Amount of Each Receipt this Period

20.18

☐ Memo Item

ERMK: ROSEN FOR NEVADA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LODEN, MARILYN, , ,

Mailing Address 649 BRIDGEWAY LANE

City
NAPLES

State
FL

Zip Code
34108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.18

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 12 / 2017

Transaction ID : INCA13331

Amount of Each Receipt this Period

20.18

☐ Memo Item

ERMK: ROSEN FOR NEVADA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LODEN, MARILYN, , ,

Mailing Address 649 BRIDGEWAY LANE

City
NAPLES

State
FL

Zip Code
34108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25.18

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 12 / 2017

Transaction ID : INCA13332

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

45.36

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 81
(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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SHULMAN, NORMA, , ,

Mailing Address 13 ALFRED RD

City
 FRAMINGHAM

State
 MA

Zip Code
 01701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 NONE

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.18

Date of Receipt

07 / 12 / 2017

Transaction ID : INCA13330

Amount of Each Receipt this Period

20.18

☐ Memo Item

ERMK: ROSEN FOR NEVADA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ARNDORFER, ELIZABETH, , ,

Mailing Address 3505 LAGUNA AVE

City
 PALO ALTO

State
 CA

Zip Code
 94306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 THE PACKARD FOUNDATION

Occupation (for Individual)
 PROGRAM OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

07 / 13 / 2017

Transaction ID : INCA13333

Amount of Each Receipt this Period

500.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BASS, ROBIN, , ,

Mailing Address 3722 AVE J

City
 BROOKLYN

State
 NY

Zip Code
 11210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 NONE

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

07 / 14 / 2017

Transaction ID : INCA13341

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: FRIENDS OF MAZIE HIRONO

SUBTOTAL of Receipts This Page (optional)..... ►

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

525.18

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 81

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BASS, ROBIN, , ,

Mailing Address 3722 AVE J

City
BROOKLYN

State
NY

Zip Code
11210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : INCA13342

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BASS, ROBIN, , ,

Mailing Address 3722 AVE J

City
BROOKLYN

State
NY

Zip Code
11210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : INCA13343

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY BALDWIN FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BASS, ROBIN, , ,

Mailing Address 3722 AVE J

City
BROOKLYN

State
NY

Zip Code
11210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 14 / 2017

Transaction ID : INCA13340

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MCCASKILL FOR MISSOURI

SUBTOTAL of Receipts This Page (optional)..... ►

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

15.00

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 81
(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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BASS, ROBIN, , ,

Mailing Address 3722 AVE J

City
 BROOKLYN

State
 NY

Zip Code
 11210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 NONE

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

07 / 14 / 2017

Transaction ID : INCA13339

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: FRIENDS OF MARIA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BASS, ROBIN, , ,

Mailing Address 3722 AVE J

City
 BROOKLYN

State
 NY

Zip Code
 11210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 NONE

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

07 / 14 / 2017

Transaction ID : INCA13337

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KLOBUCHAR FOR MINNESOTA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BASS, ROBIN, , ,

Mailing Address 3722 AVE J

City
 BROOKLYN

State
 NY

Zip Code
 11210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 NONE

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

07 / 14 / 2017

Transaction ID : INCA13334

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

SUBTOTAL of Receipts This Page (optional)..... ►

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

15.00

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

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

FOR LINE NUMBER: PAGE 13 OF 81
(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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BASS, ROBIN, , ,

Mailing Address 3722 AVE J

City
 BROOKLYN

State
 NY

Zip Code
 11210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 NONE

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 14 / 2017

Transaction ID : INCA13335

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: FEINSTEIN FOR SENATE 2018

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BASS, ROBIN, , ,

Mailing Address 3722 AVE J

City
 BROOKLYN

State
 NY

Zip Code
 11210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 NONE

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 14 / 2017

Transaction ID : INCA13338

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: STABENOW FOR US SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BASS, ROBIN, , ,

Mailing Address 3722 AVE J

City
 BROOKLYN

State
 NY

Zip Code
 11210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 NONE

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 14 / 2017

Transaction ID : INCA13336

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: GILLIBRAND FOR SENATE

SUBTOTAL of Receipts This Page (optional)..... ►

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

15.00

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

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

FOR LINE NUMBER: PAGE 14 OF 81
(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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. GOLDEN, BRUCE, , ,

Mailing Address 2500 STEINER STREET, UNIT 10

City SAN FRANCISCO	State CA	Zip Code 94115
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)
 ACCEL PARTNERS

Occupation (for Individual)
 VENTURE CAPITALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

07 / 15 / 2017

Transaction ID : INCA13344

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MERCER, MICHELLE, , ,

Mailing Address 2500 STEINER STREET, #10

City SAN FRANCISCO	State CA	Zip Code 94115
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)
 NONE

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

07 / 15 / 2017

Transaction ID : INCA13345

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. LEVY, JENNIFER, , ,

Mailing Address 2760 BRODERICK STREET

City SAN FRANCISCO	State CA	Zip Code 94123
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)
 SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
 FINANCIAL CONSULTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

07 / 16 / 2017

Transaction ID : INCA13346

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELECTING WOMEN BAY AREA

SUBTOTAL of Receipts This Page (optional)..... ►

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

3000.00

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

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

FOR LINE NUMBER: PAGE 15 OF 81
(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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. CHAIX, KATHY, , ,

Mailing Address **730 2ND STREET EAST**

City
SONOMA

State
CA

Zip Code
95476

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
VINTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

07 / 18 / 2017

Transaction ID : INCA13348

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KANG, JAN, , ,

Mailing Address **40 FAY AVENUE**

City

SAN CARLOS

State

CA

Zip Code

94070

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
BROMIUM, INC.

Occupation (for Individual)
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3200.00

Date of Receipt

07 / 18 / 2017

Transaction ID : INCA13347

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. LEVY, JENNIFER, , ,

Mailing Address **2760 BRODERICK STREET**

City

SAN FRANCISCO

State

CA

Zip Code

94123

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
FINANCIAL CONSULTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

07 / 18 / 2017

Transaction ID : INCA13349

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

SUBTOTAL of Receipts This Page (optional)..... ►

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

3000.00

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

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

FOR LINE NUMBER: PAGE 16 OF 81

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. QUINN, BRIDGET, , ,

Mailing Address 22 ROSELYN TERRACE

City
SAN FRANCISCO

State
CA

Zip Code
94118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
AUTHOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 18 / 2017

Transaction ID : INCA13350

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SOONE-BRODER, WENDY, , ,

Mailing Address 3900 FOLSOM STREET

City
SAN FRANCISCO

State
CA

Zip Code
94110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE ASIA FOUNDATION

Occupation (for Individual)
DEVELOPMENT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 18 / 2017

Transaction ID : INCA13351

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: JACKIE SPEIER FOR CONGRESS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SOONE-BRODER, WENDY, , ,

Mailing Address 3900 FOLSOM STREET

City
SAN FRANCISCO

State
CA

Zip Code
94110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THE ASIA FOUNDATION

Occupation (for Individual)
DEVELOPMENT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 18 / 2017

Transaction ID : INCA13352

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: JUDY CHU FOR CONGRESS

SUBTOTAL of Receipts This Page (optional)..... ►

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

1010.00

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 81

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BASS, ROBIN, , ,

Mailing Address 3722 AVE J

City
BROOKLYN

State
NY

Zip Code
11210

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2017

Transaction ID : INCA13356

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COHEN, TOD, , ,

Mailing Address 839 MELVILLE AVENUE

City
PALO ALTO

State
CA

Zip Code
94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STUBHUB

Occupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2017

Transaction ID : INCA13354

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DIBRIENZA, JENNIFER, , ,

Mailing Address 186 PARK AVE

City
PALO ALTO

State
CA

Zip Code
94306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
EDUCATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2017

Transaction ID : INCA13355

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

SUBTOTAL of Receipts This Page (optional)..... ►

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

2005.00

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 81

☒ 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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. HARRIS, KATHLEEN, , ,

Mailing Address 1601 HILL ST

City
SANTA MONICA

State
CA

Zip Code
90405

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2017

Transaction ID : INCA13363

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. HARRIS, KATHLEEN, , ,

Mailing Address 1601 HILL ST

City
SANTA MONICA

State
CA

Zip Code
90405

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2017

Transaction ID : INCA13360

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: JUDY CHU FOR CONGRESS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. HARRIS, KATHLEEN, , ,

Mailing Address 1601 HILL ST

City
SANTA MONICA

State
CA

Zip Code
90405

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2017

Transaction ID : INCA13361

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KAREN BASS FOR CONGRESS

SUBTOTAL of Receipts This Page (optional)..... ►

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

15.00

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

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

FOR LINE NUMBER: PAGE 19 OF 81

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRIS, KATHLEEN, , ,

Mailing Address 1601 HILL ST

City
SANTA MONICA

State
CA

Zip Code
90405

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2017

Transaction ID : INCA13359

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: PRAMILA FOR CONGRESS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARRIS, KATHLEEN, , ,

Mailing Address 1601 HILL ST

City
SANTA MONICA

State
CA

Zip Code
90405

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2017

Transaction ID : INCA13357

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: JACKIE SPEIER FOR CONGRESS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARRIS, KATHLEEN, , ,

Mailing Address 1601 HILL ST

City
SANTA MONICA

State
CA

Zip Code
90405

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2017

Transaction ID : INCA13358

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: SCHAKOWSKY FOR CONGRESS

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

15.00

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 20 OF 81

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRIS, KATHLEEN, , ,

Mailing Address 1601 HILL ST

City
SANTA MONICA

State
CA

Zip Code
90405

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 19 / 2017

Transaction ID : INCA13362

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: WOMENCOUNT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAYES, NANCY, , ,

Mailing Address 70 CERVANTES BLVD

City
SAN FRANCISCO

State
CA

Zip Code
94123-1606

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

ANGEL INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 19 / 2017

Transaction ID : INCA13353

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLTON, ELIZABETH, , ,

Mailing Address ELIZABETH COLTON, 1848 PINE STREET

City
SAN FRANCISCO

State
CA

Zip Code
94109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 20 / 2017

Transaction ID : INCA13364

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

SUBTOTAL of Receipts This Page (optional)..... ►

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

2005.00

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 81

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHIFF, JOSIE, , ,

Mailing Address 170 LAKEVIEW DRIVE

City
WOODSIDE

State
CA

Zip Code
94062

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 23 / 2017

Transaction ID : INCA13365

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STEWART, SUSANNE, , ,

Mailing Address 421, POPPY PLACE

City
MTN. VIEW

State
CA

Zip Code
94043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

180.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 23 / 2017

Transaction ID : INCA13369

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY BALDWIN FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STEWART, SUSANNE, , ,

Mailing Address 421, POPPY PLACE

City
MTN. VIEW

State
CA

Zip Code
94043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

180.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 23 / 2017

Transaction ID : INCA13368

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

SUBTOTAL of Receipts This Page (optional)..... ►

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

1010.00

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

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

FOR LINE NUMBER: PAGE 22 OF 81
(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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. STEWART, SUSANNE, , ,			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>07 / 23 / 2017</div> </div>	
Mailing Address 421, POPPY PLACE			Transaction ID : INCA13367	
City MTN. VIEW	State CA	Zip Code 94043	Amount of Each Receipt this Period <div> <div></div> <div>5.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			<input type="checkbox"/> Memo Item ERMK: KAMALA HARRIS FOR SENATE	
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div></div> <div>180.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. STEWART, SUSANNE, , ,			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>07 / 23 / 2017</div> </div>	
Mailing Address 421, POPPY PLACE			Transaction ID : INCA13366	
City MTN. VIEW	State CA	Zip Code 94043	Amount of Each Receipt this Period <div> <div></div> <div>5.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			<input type="checkbox"/> Memo Item ERMK: KLOBUCHAR FOR MINNESOTA	
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div></div> <div>180.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. STEWART, SUSANNE, , ,			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>07 / 23 / 2017</div> </div>	
Mailing Address 421, POPPY PLACE			Transaction ID : INCA13370	
City MTN. VIEW	State CA	Zip Code 94043	Amount of Each Receipt this Period <div> <div></div> <div>5.00</div> </div>	
FEC ID number of contributing federal political committee. <div> <div>C</div> <div></div> </div>			<input type="checkbox"/> Memo Item ERMK: GILLIBRAND FOR SENATE	
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div></div> <div>180.00</div> </div>		

SUBTOTAL of Receipts This Page (optional).....▶	<div> <div></div> <div>15.00</div> </div>
TOTAL This Period (last page this line number only).....▶	<div> <div></div> <div></div> </div>

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

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

FOR LINE NUMBER: PAGE 23 OF 81

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STEWART, SUSANNE, , ,

Mailing Address 421, POPPY PLACE

City
MTN. VIEW

State
CA

Zip Code
94043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

180.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 23 / 2017

Transaction ID : INCA13371

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PHILLIPS, DANA, , ,

Mailing Address 740 SEALE AVENUE

City
PALO ALTO

State
CA

Zip Code
94303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 24 / 2017

Transaction ID : INCA13373

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROYER, LYNNE, , ,

Mailing Address 2 HILLCREST DRIVE

City
ORINDA

State
CA

Zip Code
94563

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LOOMIS SAYLES

Occupation (for Individual)
PORTFOLIO MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 24 / 2017

Transaction ID : INCA13374

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

SUBTOTAL of Receipts This Page (optional)..... ►

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

2005.00

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

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

FOR LINE NUMBER: PAGE 24 OF 81
(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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SISSON, GRETCHEN, , ,

Mailing Address 710 STEINER STREET

City SAN FRANCISCO	State CA	Zip Code 94117
-----------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UCSF

Occupation (for Individual)
SOCIOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

07 / **24** / **2017**

Transaction ID : INCA13372

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELECTING WOMEN BAY AREA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SISSON, GRETCHEN, , ,

Mailing Address 710 STEINER STREET

City SAN FRANCISCO	State CA	Zip Code 94117
-----------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UCSF

Occupation (for Individual)
SOCIOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

07 / **25** / **2017**

Transaction ID : INCA13375

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BUTTARO, THERA, , ,

Mailing Address 575 HIGHWAY 1

City BODEGA BAY	State CA	Zip Code 94923
--------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SONOMA COAST LIVING

Occupation (for Individual)
REAL ESTATE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

07 / **26** / **2017**

Transaction ID : INCA13378

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

SUBTOTAL of Receipts This Page (optional)..... ►

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

3000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER: PAGE 25 OF 81
 (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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. FLYNN, JULIE, , ,			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 07 26 2017 </div> Transaction ID : INCA13376	
Mailing Address 225 BUSH STREET			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1000.00 </div>	
City SAN FRANCISCO	State CA	Zip Code 94104	<input type="checkbox"/> Memo Item ERMK: ELIZABETH FOR MA	
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> C </div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 2000.00 </div>	
Name of Employer (for Individual) SELF-EMPLOYED, SAME NAME			Occupation (for Individual) ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SCHLENGER, KIRSTEN, , ,			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 07 26 2017 </div> Transaction ID : INCA13377	
Mailing Address 550 MONTGOMERY STREET, SUITE 650			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1000.00 </div>	
City SAN FRANCISCO	State CA	Zip Code 94111	<input type="checkbox"/> Memo Item ERMK: ELIZABETH FOR MA	
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> C </div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1000.00 </div>	
Name of Employer (for Individual) WEAVER SCHLENGER LLP			Occupation (for Individual) MANAGING PARTNER / OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WINOGRAD, CAROL, , ,			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 07 26 2017 </div> Transaction ID : INCA13379	
Mailing Address 746 ESPLANADA WAY			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1000.00 </div>	
City STANFORD	State CA	Zip Code 94305	<input type="checkbox"/> Memo Item ERMK: ELIZABETH FOR MA	
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> C </div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 1000.00 </div>	
Name of Employer (for Individual) NONE			Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
SUBTOTAL of Receipts This Page (optional)..... ▶			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> 3000.00 </div>	
TOTAL This Period (last page this line number only)..... ▶			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> </div>	

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

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

FOR LINE NUMBER: PAGE 26 OF 81
(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GONZALES, NORA, , ,

Mailing Address 8700 HADDON AVE

City
SUN VALLEY

State
CA

Zip Code
91352

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROBERT HALF INT'L

Occupation (for Individual)
ACCOUNTING CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 27 / 2017

Transaction ID : INCA13395

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GONZALES, NORA, , ,

Mailing Address 8700 HADDON AVE

City
SUN VALLEY

State
CA

Zip Code
91352

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROBERT HALF INT'L

Occupation (for Individual)
ACCOUNTING CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 27 / 2017

Transaction ID : INCA13393

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: FRIENDS OF MAZIE HIRONO

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GONZALES, NORA, , ,

Mailing Address 8700 HADDON AVE

City
SUN VALLEY

State
CA

Zip Code
91352

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ROBERT HALF INT'L

Occupation (for Individual)
ACCOUNTING CLERK

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

35.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 27 / 2017

Transaction ID : INCA13394

Amount of Each Receipt this Period

15.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

SUBTOTAL of Receipts This Page (optional)..... ►

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

35.00

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

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

FOR LINE NUMBER: PAGE 27 OF 81
(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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. HAZAGA, ROBERT, , ,

Mailing Address 500 PATERSON PLANK ROAD

City
 UNION CITY

State
 NJ

Zip Code
 07087

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 RIGHTS INTERNATIONAL GROUP, INC

Occupation (for Individual)
 PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.18

Date of Receipt

07 / **27** / **2017**

Transaction ID : INCA13386

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. HAZAGA, ROBERT, , ,

Mailing Address 500 PATERSON PLANK ROAD

City
 UNION CITY

State
 NJ

Zip Code
 07087

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 RIGHTS INTERNATIONAL GROUP, INC

Occupation (for Individual)
 PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.18

Date of Receipt

07 / **27** / **2017**

Transaction ID : INCA13385

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. HAZAGA, ROBERT, , ,

Mailing Address 500 PATERSON PLANK ROAD

City
 UNION CITY

State
 NJ

Zip Code
 07087

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 RIGHTS INTERNATIONAL GROUP, INC

Occupation (for Individual)
 PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

95.18

Date of Receipt

07 / **27** / **2017**

Transaction ID : INCA13381

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MCCASKILL FOR MISSOURI

SUBTOTAL of Receipts This Page (optional)..... ►

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

15.00

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

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

FOR LINE NUMBER: PAGE 28 OF 81

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HAZAGA, ROBERT, , ,

Mailing Address 500 PATERSON PLANK ROAD

City
UNION CITY

State
NJ

Zip Code
07087

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RIGHTS INTERNATIONAL GROUP, INC

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.18

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 27 / 2017

Transaction ID : INCA13383

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAZAGA, ROBERT, , ,

Mailing Address 500 PATERSON PLANK ROAD

City
UNION CITY

State
NJ

Zip Code
07087

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RIGHTS INTERNATIONAL GROUP, INC

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95.18

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 27 / 2017

Transaction ID : INCA13382

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: STABENOW FOR US SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAZAGA, ROBERT, , ,

Mailing Address 500 PATERSON PLANK ROAD

City
UNION CITY

State
NJ

Zip Code
07087

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RIGHTS INTERNATIONAL GROUP, INC

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

95.18

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 27 / 2017

Transaction ID : INCA13384

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: FRIENDS OF MAZIE HIRONO

SUBTOTAL of Receipts This Page (optional)..... ►

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

15.00

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

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

FOR LINE NUMBER: PAGE 29 OF 81

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LONG, KATHLEEN, , ,

Mailing Address 304 OLYMPIAN WAY

City
PACIFICA

State
CA

Zip Code
94044

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 27 / 2017

Transaction ID : INCA13380

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TURNER, BILLYE, , ,

Mailing Address 2300 NE 4TH STREET, BOX 1026

City
BEND

State
OR

Zip Code
97701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

ART CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 27 / 2017

Transaction ID : INCA13392

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TURNER, BILLYE, , ,

Mailing Address 2300 NE 4TH STREET, BOX 1026

City
BEND

State
OR

Zip Code
97701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF-EMPLOYED, SAME NAME

Occupation (for Individual)

ART CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

60.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 27 / 2017

Transaction ID : INCA13391

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: ROSEN FOR NEVADA

SUBTOTAL of Receipts This Page (optional)..... ►

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

1020.00

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

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

FOR LINE NUMBER: PAGE 30 OF 81

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TURNER, BILLYE, , ,

Mailing Address 2300 NE 4TH STREET, BOX 1026

City
BEND

State
OR

Zip Code
97701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
ART CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 27 / 2017

Transaction ID : INCA13388

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: STABENOW FOR US SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TURNER, BILLYE, , ,

Mailing Address 2300 NE 4TH STREET, BOX 1026

City
BEND

State
OR

Zip Code
97701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
ART CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 27 / 2017

Transaction ID : INCA13389

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TURNER, BILLYE, , ,

Mailing Address 2300 NE 4TH STREET, BOX 1026

City
BEND

State
OR

Zip Code
97701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
ART CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

60.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 27 / 2017

Transaction ID : INCA13390

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: FRIENDS OF MAZIE HIRONO

SUBTOTAL of Receipts This Page (optional)..... ►

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

30.00

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

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

FOR LINE NUMBER: PAGE 31 OF 81
(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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TURNER, BILLYE, , ,

Mailing Address **2300 NE 4TH STREET, BOX 1026**

City
BEND

State
OR

Zip Code
97701

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
ART CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60.00

Date of Receipt

07 / 27 / 2017

Transaction ID : INCA13387

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: MCCASKILL FOR MISSOURI

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. VALERIOTE, SUSAN, , ,

Mailing Address **441 WALSH RD**

City

ATHERTON

State

CA

Zip Code

94027

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

07 / 27 / 2017

Transaction ID : INCA13396

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. DORAHY, SARAH, , ,

Mailing Address **468 WESTRIDGE DR**

City

PORTOLA VALLEY

State

CA

Zip Code

94028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

07 / 28 / 2017

Transaction ID : INCA13402

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

SUBTOTAL of Receipts This Page (optional)..... ►

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

2010.00

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

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

FOR LINE NUMBER: PAGE 32 OF 81
(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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. FLUHR, MARGARET, , ,			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>07 / 28 / 2017</div> </div>	
Mailing Address 433 EAST 56 STREET			Transaction ID : INCA13401	
City NEW YORK	State NY	Zip Code 10022	Amount of Each Receipt this Period <div> <div></div> <div>10.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item ERMK: ROSEN FOR NEVADA		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div></div> <div>160.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FLUHR, MARGARET, , ,			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>07 / 28 / 2017</div> </div>	
Mailing Address 433 EAST 56 STREET			Transaction ID : INCA13400	
City NEW YORK	State NY	Zip Code 10022	Amount of Each Receipt this Period <div> <div></div> <div>10.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item ERMK: FRIENDS OF MAZIE HIRONO		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div></div> <div>160.00</div> </div>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FLUHR, MARGARET, , ,			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y Y</div> <div>07 / 28 / 2017</div> </div>	
Mailing Address 433 EAST 56 STREET			Transaction ID : INCA13399	
City NEW YORK	State NY	Zip Code 10022	Amount of Each Receipt this Period <div> <div></div> <div>10.00</div> </div>	
FEC ID number of contributing federal political committee. C		Memo Item ERMK: MCCASKILL FOR MISSOURI		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <div> <div></div> <div>160.00</div> </div>		

SUBTOTAL of Receipts This Page (optional)..... ►

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

30.00

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

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

FOR LINE NUMBER: PAGE 33 OF 81

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FLUHR, MARGARET, , ,

Mailing Address 433 EAST 56 STREET

City
NEW YORK

State
NY

Zip Code
10022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

160.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : INCA13398

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FLUHR, MARGARET, , ,

Mailing Address 433 EAST 56 STREET

City
NEW YORK

State
NY

Zip Code
10022

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

160.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : INCA13397

Amount of Each Receipt this Period

10.00

☐ Memo Item

ERMK: STABENOW FOR US SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : INCA13411

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: HEIDI FOR SENATE

SUBTOTAL of Receipts This Page (optional)..... ►

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

25.00

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

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

FOR LINE NUMBER: PAGE 34 OF 81
(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : INCA13412

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: TAMMY BALDWIN FOR SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : INCA13410

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: FRIENDS OF MAZIE HIRONO

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City
SAN FRANCISCO

State
CA

Zip Code
94107

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 28 / 2017

Transaction ID : INCA13408

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: FRIENDS OF MARIA

SUBTOTAL of Receipts This Page (optional)..... ►

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

15.00

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

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

FOR LINE NUMBER: PAGE 35 OF 81
(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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City SAN FRANCISCO	State CA	Zip Code 94107
-----------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
 PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / **28** / **2017**

Transaction ID : INCA13407

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: STABENOW FOR US SENATE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City SAN FRANCISCO	State CA	Zip Code 94107
-----------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
 PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / **28** / **2017**

Transaction ID : INCA13409

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: MCCASKILL FOR MISSOURI

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City SAN FRANCISCO	State CA	Zip Code 94107
-----------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
 PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / **28** / **2017**

Transaction ID : INCA13405

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: GILLIBRAND FOR SENATE

SUBTOTAL of Receipts This Page (optional)..... ►

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

15.00

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

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

FOR LINE NUMBER: PAGE 36 OF 81
(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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City SAN FRANCISCO	State CA	Zip Code 94107
-----------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
 PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / **28** / **2017**

Transaction ID : INCA13404

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: FEINSTEIN FOR SENATE 2018

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City SAN FRANCISCO	State CA	Zip Code 94107
-----------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
 PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / **28** / **2017**

Transaction ID : INCA13403

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. LA FONTAINE FIORE, KRISTIN, , ,

Mailing Address 1724 20TH STREET

City SAN FRANCISCO	State CA	Zip Code 94107
-----------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
 PERSONAL TRAINER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / **28** / **2017**

Transaction ID : INCA13406

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: KLOBUCHAR FOR MINNESOTA

SUBTOTAL of Receipts This Page (optional)..... ►

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

15.00

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

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

FOR LINE NUMBER: PAGE 37 OF 81
(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPEISER, MARY, , ,

Mailing Address 160 GARLAND DRIVE

City
MENLO PARK

State
CA

Zip Code
94025

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 30 / 2017

Transaction ID : INCA13413

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DOLBY, NATASHA, , ,

Mailing Address 2115 BUSH ST.

City
SAN FRANCISCO

State
CA

Zip Code
94115

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
FREEDOM FORWARD

Occupation (for Individual)
CO-FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2017

Transaction ID : INCA13419

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FRANCIS, KERRY, , ,

Mailing Address 5940 ESTATES DRIVE

City
OAKLAND

State
CA

Zip Code
94611

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DELOITTE

Occupation (for Individual)
ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2017

Transaction ID : INCA13420

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

SUBTOTAL of Receipts This Page (optional)..... ►

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

3000.00

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

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

FOR LINE NUMBER: PAGE 38 OF 81
(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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. GORDON, KATHERINE, , ,

Mailing Address 415 CAMBRIDGE AVENUE, SUITE 2

City
 PALO ALTO

State
 CA

Zip Code
 94306

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 THE 3% MOVEMENT

Occupation (for Individual)
 CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2017

Transaction ID : INCA13415

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. HWANG, SUSIE, , ,

Mailing Address 159 MELVILLE AVE

City
 PALO ALTO

State
 CA

Zip Code
 94301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 SELF-EMPLOYED, SAME NAME

Occupation (for Individual)
 ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2017

Transaction ID : INCA13416

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. METZLER, AMY, , ,

Mailing Address 3340 CLAY STREET

City
 SAN FRANCISCO

State
 CA

Zip Code
 94118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
 NONE

Occupation (for Individual)
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 31 / 2017

Transaction ID : INCA13414

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

SUBTOTAL of Receipts This Page (optional)..... ►

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

3000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 39 OF 81
(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YEN, MALLUN, , ,

Mailing Address 2995 WOODSIDE ROAD

City
WOODSIDEState
CAZip Code
94062FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RPX

Occupation (for Individual)

CHIEF BUSINESS & PRODUCT OFFIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1005.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : INCA13417

Amount of Each Receipt this Period

5.00

☐ Memo Item

ERMK: ELECTING WOMEN BAY AREA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. YEN, MALLUN, , ,

Mailing Address 2995 WOODSIDE ROAD

City
WOODSIDEState
CAZip Code
94062FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

RPX

Occupation (for Individual)

CHIEF BUSINESS & PRODUCT OFFIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1005.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
07		31		2017

Transaction ID : INCA13418

Amount of Each Receipt this Period

1000.00

☐ Memo Item

ERMK: ELIZABETH FOR MA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

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

☐ Memo Item

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

1005.00

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

39650.72

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 40 OF 81

☐ 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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTON

State
MA

Zip Code
02129

FEC ID number of contributing
federal political committee.

C

C00500843

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1611.20

Date of Receipt

07 / 05 / 2017

Transaction ID : INCA13541

Amount of Each Receipt this Period

760.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. FEINSTEIN FOR SENATE 2018

Mailing Address 918 PENNSYLVANIA AVE SE

City
WASHINGTON

State
DC

Zip Code
20003

FEC ID number of contributing
federal political committee.

C

C00539890

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44.33

Date of Receipt

07 / 05 / 2017

Transaction ID : INCA13542

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. FRIENDS OF MARIA

Mailing Address PO BOX 12740

City
SEATTLE

State
WA

Zip Code
98111

FEC ID number of contributing
federal political committee.

C

C00349506

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

57.40

Date of Receipt

07 / 05 / 2017

Transaction ID : INCA13546

Amount of Each Receipt this Period

0.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

760.60

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 41 OF 81

☐ 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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. FRIENDS OF MAZIE HIRONO

Mailing Address PO BOX 677

City
HONOLULU

State
HI

Zip Code
96809

FEC ID number of contributing
federal political committee.

C C00420760

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

43.13

Date of Receipt

07 / **05** / **2017**

Transaction ID : INCA13548

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. GILLIBRAND FOR SENATE

Mailing Address 313 C STREET, NE

City
WASHINGTON

State
DC

Zip Code
20002

FEC ID number of contributing
federal political committee.

C C00413914

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2939.20

Date of Receipt

07 / **05** / **2017**

Transaction ID : INCA13543

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCK

State
ND

Zip Code
58502

FEC ID number of contributing
federal political committee.

C C00505552

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

26.40

Date of Receipt

07 / **05** / **2017**

Transaction ID : INCA13549

Amount of Each Receipt this Period

0.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

0.60

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 42 OF 81

☐ 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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KLOBUCHAR FOR MINNESOTA

Mailing Address PO BOX 4146

City
ST PAUL

State
MN

Zip Code
55104

FEC ID number of contributing
federal political committee.

C C00431353

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52.73

Date of Receipt

07 / **05** / **2017**

Transaction ID : INCA13544

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUIS

State
MO

Zip Code
63130

FEC ID number of contributing
federal political committee.

C C00577148

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1851.20

Date of Receipt

07 / **05** / **2017**

Transaction ID : INCA13547

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSING

State
MI

Zip Code
48826

FEC ID number of contributing
federal political committee.

C C00344473

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1491.60

Date of Receipt

07 / **05** / **2017**

Transaction ID : INCA13545

Amount of Each Receipt this Period

0.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

0.60

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

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

FOR LINE NUMBER: PAGE 43 OF 81
(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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISON

State
WI

Zip Code
53701

FEC ID number of contributing
federal political committee.

C

C00326801

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1982.52

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 05 / 2017

Transaction ID : INCA13550

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTON

State
MA

Zip Code
02129

FEC ID number of contributing
federal political committee.

C

C00500843

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1611.20

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 12 / 2017

Transaction ID : INCA13551

Amount of Each Receipt this Period

268.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. ELECTING WOMEN SAN FRANCISCO PAC

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCO

State
CA

Zip Code
94118

FEC ID number of contributing
federal political committee.

C

C00585687

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 19 / 2017

Transaction ID : INCA13563

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

308.20

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 44 OF 81

☐ 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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTON

State
MA

Zip Code
02129

FEC ID number of contributing
federal political committee.

C C00500843

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1611.20

Date of Receipt

07 / **19** / **2017**

Transaction ID : INCA13552

Amount of Each Receipt this Period

240.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. FEINSTEIN FOR SENATE 2018

Mailing Address 918 PENNSYLVANIA AVE SE

City
WASHINGTON

State
DC

Zip Code
20003

FEC ID number of contributing
federal political committee.

C C00539890

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44.33

Date of Receipt

07 / **19** / **2017**

Transaction ID : INCA13553

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. FRIENDS OF MARIA

Mailing Address PO BOX 12740

City
SEATTLE

State
WA

Zip Code
98111

FEC ID number of contributing
federal political committee.

C C00349506

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

57.40

Date of Receipt

07 / **19** / **2017**

Transaction ID : INCA13557

Amount of Each Receipt this Period

0.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

240.60

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 45 OF 81

☐ 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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FRIENDS OF MAZIE HIRONO

Mailing Address PO BOX 677

City
HONOLULU

State
HI

Zip Code
96809

FEC ID number of contributing
federal political committee.

C C00420760

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

43.13

Date of Receipt

07 / **19** / **2017**

Transaction ID : INCA13559

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILLIBRAND FOR SENATE

Mailing Address 313 C STREET, NE

City
WASHINGTON

State
DC

Zip Code
20002

FEC ID number of contributing
federal political committee.

C C00413914

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2939.20

Date of Receipt

07 / **19** / **2017**

Transaction ID : INCA13554

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCK

State
ND

Zip Code
58502

FEC ID number of contributing
federal political committee.

C C00505552

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

26.40

Date of Receipt

07 / **19** / **2017**

Transaction ID : INCA13560

Amount of Each Receipt this Period

0.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

0.60

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

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

FOR LINE NUMBER: PAGE 46 OF 81
(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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. JACKIE SPEIER FOR CONGRESS

Mailing Address P.O. BOX 112

City State Zip Code
 BURLINGAME CA 94011

FEC ID number of contributing federal political committee. **C** C00443705

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 3.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 19 / 2017

Transaction ID : INCA13564

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. JUDY CHU FOR CONGRESS

Mailing Address 16633 VENTURA BLVD # 1008

City State Zip Code
 ENCINO CA 91436

FEC ID number of contributing federal political committee. **C** C00458125

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
 1.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 19 / 2017

Transaction ID : INCA13565

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KLOBUCHAR FOR MINNESOTA

Mailing Address PO BOX 4146

City State Zip Code
 ST PAUL MN 55104

FEC ID number of contributing federal political committee. **C** C00431353

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼
 52.73

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 19 / 2017

Transaction ID : INCA13555

Amount of Each Receipt this Period

0.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

0.60

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 47 OF 81

☐ 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)
WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUIS

State
MO

Zip Code
63130

FEC ID number of contributing
federal political committee.

C

C00577148

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1851.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2017

Transaction ID : INCA13558

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSON

State
NV

Zip Code
89074

FEC ID number of contributing
federal political committee.

C

C00606939

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

27.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2017

Transaction ID : INCA13562

Amount of Each Receipt this Period

23.24

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSING

State
MI

Zip Code
48826

FEC ID number of contributing
federal political committee.

C

C00344473

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1491.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 19 / 2017

Transaction ID : INCA13556

Amount of Each Receipt this Period

0.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

23.64

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 48 OF 81

☐ 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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISON

State
WI

Zip Code
53701

FEC ID number of contributing
federal political committee.

C C00326801

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1982.52

Date of Receipt

07 / **19** / **2017**

Transaction ID : INCA13561

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELECTING WOMEN SAN FRANCISCO PAC

Mailing Address 393 7TH AVENUE, SUITE 301

City

SAN FRANCISCO

State

CA

Zip Code

94118

FEC ID number of contributing
federal political committee.

C C00585687

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

07 / **26** / **2017**

Transaction ID : INCA13571

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City

BOSTON

State

MA

Zip Code

02129

FEC ID number of contributing
federal political committee.

C C00500843

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1611.20

Date of Receipt

07 / **26** / **2017**

Transaction ID : INCA13567

Amount of Each Receipt this Period

320.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

360.40

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

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

FOR LINE NUMBER: PAGE 49 OF 81

(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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GILLIBRAND FOR SENATE

Mailing Address 313 C STREET, NE

City
WASHINGTON

State
DC

Zip Code
20002

FEC ID number of contributing
federal political committee.

C

C00413914

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2939.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2017

Transaction ID : INCA13568

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JACKIE SPEIER FOR CONGRESS

Mailing Address P.O. BOX 112

City
BURLINGAME

State
CA

Zip Code
94011

FEC ID number of contributing
federal political committee.

C

C00443705

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2017

Transaction ID : INCA13572

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JUDY CHU FOR CONGRESS

Mailing Address 16633 VENTURA BLVD # 1008

City
ENCINO

State
CA

Zip Code
91436

FEC ID number of contributing
federal political committee.

C

C00458125

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2017

Transaction ID : INCA13573

Amount of Each Receipt this Period

0.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

0.60

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 50 OF 81

☐ 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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KAMALA HARRIS FOR SENATE

Mailing Address 777 S FIGUEROA ST STE 4050

City
LOS ANGELES

State
CA

Zip Code
90017

FEC ID number of contributing
federal political committee.

C

C00571919

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2017

Transaction ID : INCA13577

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KAREN BASS FOR CONGRESS

Mailing Address 777 S. FIGUEROA STREET SUITE 4050

City
LOS ANGELES

State
CA

Zip Code
90017

FEC ID number of contributing
federal political committee.

C

C00476523

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2017

Transaction ID : INCA13576

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KLOBUCHAR FOR MINNESOTA

Mailing Address PO BOX 4146

City
ST PAUL

State
MN

Zip Code
55104

FEC ID number of contributing
federal political committee.

C

C00431353

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

52.73

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 26 / 2017

Transaction ID : INCA13569

Amount of Each Receipt this Period

0.20

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

0.60

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 51 OF 81

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)

WOMENCOUNT PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PRAMILA FOR CONGRESS

Mailing Address PO BOX 20753

City
SEATTLEState
WAZip Code
98102FEC ID number of contributing
federal political committee.

C

C00605592

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2017

Transaction ID : INCA13575

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHAKOWSKY FOR CONGRESS

Mailing Address P.O. BOX 5130

City
EVANSTONState
ILZip Code
60204FEC ID number of contributing
federal political committee.

C

C00327023

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2017

Transaction ID : INCA13574

Amount of Each Receipt this Period

0.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISONState
WIZip Code
53701FEC ID number of contributing
federal political committee.

C

C00326801

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1982.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2017

Transaction ID : INCA13570

Amount of Each Receipt this Period

0.20

☐ Memo Item

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

0.60

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

1697.64

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 52 OF 81

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. FIRST DATAMailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000City
ATLANTAState
GAZip Code
30342Purpose of Disbursement
CREDIT CARD PROCESSING FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2017

FEC Identification Number

C

Transaction ID : EXPB13314

Amount of Each Disbursement this Period

370.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST DATAMailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000City
ATLANTAState
GAZip Code
30342Purpose of Disbursement
CREDIT CARD PROCESSING FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2017

FEC Identification Number

C

Transaction ID : EXPB13315

Amount of Each Disbursement this Period

96.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST DATAMailing Address 5565 GLENRIDGE CONNECTOR NE
SUITE 2000City
ATLANTAState
GAZip Code
30342Purpose of Disbursement
CREDIT CARD PROCESSING FEES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2017

FEC Identification Number

C

Transaction ID : EXPB13316

Amount of Each Disbursement this Period

40.53

☐ Memo Item

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

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

507.44

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 53 OF 81

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City
SAN FRANCISCOState
CAZip Code
94128Purpose of Disbursement
ACCOUNT FEE

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C

Transaction ID : EXPB13317

Amount of Each Disbursement this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK

Mailing Address 464 CALIFORNIA STREET

City
SAN FRANCISCOState
CAZip Code
94163Purpose of Disbursement
BANK FEE

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	1			2	0	1	7		

FEC Identification Number

C

Transaction ID : EXPB13594

Amount of Each Disbursement this Period

50.63

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

75.63

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

583.07

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129Purpose of Disbursement
ERMK: KRISTIN LA FONTAINE FIORE-TRANSMITTED BY CHECK. PAC
LIMIT NOT AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: MA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13421**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129Purpose of Disbursement
ERMK: LAURA KAVANAUGH-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: MA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13431**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129Purpose of Disbursement
ERMK: LAURA CORNISH-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: MA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13432**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2005.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: MARY STIMMLER-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13433**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: TRICIA HERRICK-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13434**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: SARA SMIRIN-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13435**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**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 PageFOR LINE NUMBER:
(check only one)

PAGE 56 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: ANN POLETTI-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED
Candidate Name**WARREN, ELIZABETH, , ,**

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13436**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: BETSY COTTON-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED
Candidate Name**WARREN, ELIZABETH, , ,**

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13437**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: ABBIE KNOPPER-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED
Candidate Name**WARREN, ELIZABETH, , ,**

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13438**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**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 PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: KIMBERLY CLEMENT-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13439**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: ANNE FRAHN-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13440**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: JESSICA SPEISER-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13441**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**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 PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: ROBYN HELMLINGER-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13442**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: SUSIE HWANG-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13443**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: AMANDA SCOTT-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13444**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**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 PageFOR LINE NUMBER:
(check only one)

PAGE 59 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: ANNE HITZ-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2017

FEC Identification Number

C C00500843**Transaction ID : EXPB13445**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: SARA HOLTZ-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2017

FEC Identification Number

C C00500843**Transaction ID : EXPB13446**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: MICHELE DAUBER-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2017

FEC Identification Number

C C00500843**Transaction ID : EXPB13447**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**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 PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: MICHELLE DE BLANK-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2017

FEC Identification Number

C C00500843**Transaction ID : EXPB13448**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: MARY JANE WEAVER-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2017

FEC Identification Number

C C00500843**Transaction ID : EXPB13449**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FEINSTEIN FOR SENATE 2018

Mailing Address 918 PENNSYLVANIA AVE SE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

ERMK: KRISTIN LA FONTAINE FIORE-TRANSMITTED BY CHECK. PAC LIMIT NOT AFFECTED

Candidate Name

FEINSTEIN, DIANE, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: CA

District:

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2017

FEC Identification Number

C C00539890**Transaction ID : EXPB13422**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2005.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF MARIA

Mailing Address PO BOX 12740

City
SEATTLEState
WAZip Code
98111Purpose of Disbursement
ERMK: KRISTIN LA FONTAINE FIORE-TRANSMITTED BY CHECK. PAC
LIMIT NOT AFFECTED

Candidate Name

CANTWELL, MARIA, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: WA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00349506**Transaction ID : EXPB13426**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF MAZIE HIRONO

Mailing Address PO BOX 677

City
HONOLULUState
HIZip Code
96809Purpose of Disbursement
ERMK: KRISTIN LA FONTAINE FIORE-TRANSMITTED BY CHECK. PAC
LIMIT NOT AFFECTED

Candidate Name

HIRONO, MAZIE, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: HI District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00420760**Transaction ID : EXPB13428**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GILLIBRAND FOR SENATE

Mailing Address 313 C STREET, NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
ERMK: KRISTIN LA FONTAINE FIORE-TRANSMITTED BY CHECK. PAC
LIMIT NOT AFFECTED

Candidate Name

GILLIBRAND, KIRSTEN ELIZABETH, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: NY District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00413914**Transaction ID : EXPB13423**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 62 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCKState
NDZip Code
58502Purpose of Disbursement
ERMK: KRISTIN LA FONTAINE FIORE-TRANSMITTED BY CHECK. PAC
LIMIT NOT AFFECTED

Candidate Name

HEITKAMP, HEIDI, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: ND District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00505552**Transaction ID : EXPB13429**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KLOBUCHAR FOR MINNESOTA

Mailing Address PO BOX 4146

City
ST PAULState
MNZip Code
55104Purpose of Disbursement
ERMK: KRISTIN LA FONTAINE FIORE-TRANSMITTED BY CHECK. PAC
LIMIT NOT AFFECTED

Candidate Name

KLOBUCHAR, AMY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: MN District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00431353**Transaction ID : EXPB13424**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUISState
MOZip Code
63130Purpose of Disbursement
ERMK: KRISTIN LA FONTAINE FIORE-TRANSMITTED BY CHECK. PAC
LIMIT NOT AFFECTED

Candidate Name

MCCASKILL, CLAIRE, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: MO District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00577148**Transaction ID : EXPB13427**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSINGState
MIZip Code
48826Purpose of Disbursement
ERMK: KRISTIN LA FONTAINE FIORE-TRANSMITTED BY CHECK. PAC
LIMIT NOT AFFECTED

Candidate Name

STABENOW, DEBBIE, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: MI District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00344473**Transaction ID : EXPB13425**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISONState
WIZip Code
53701Purpose of Disbursement
ERMK: KRISTIN LA FONTAINE FIORE-TRANSMITTED BY CHECK. PAC
LIMIT NOT AFFECTED

Candidate Name

BALDWIN, TAMMY, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: WI District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

FEC Identification Number

C C00326801**Transaction ID : EXPB13430**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129Purpose of Disbursement
ERMK: SUZI ALEXANDER-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: MA District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	2			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13450**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1	0	1	0	.	0	0
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 64 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: TONY CRABB-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	2			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13451**

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: BARBARA GRASSESCHI-TRANSMITTED BY CHECK. PAC LIMIT

NOT AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify)

State: MA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	2			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13452**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: ARIEL KELLEY-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	2			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13453**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4700.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: CHRISTINE SILVER-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	7				1	2						2	0	1	7

FEC Identification Number

C C00500843**Transaction ID : EXPB13454**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELECTING WOMEN SAN FRANCISCO PAC

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Purpose of Disbursement

ERMK: JENNIFER LEVY-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

ELECTING WOMEN SAN FRANCISCO PAC

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify)

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	7				1	9						2	0	1	7

FEC Identification Number

C C00585687**Transaction ID : EXPB13472**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	7				1	9						2	0	1	7

FEC Identification Number

C C00500843**Transaction ID : EXPB13460**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2005.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 66 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: BRUCE GOLDEN-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13470**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: MICHELLE MERCER-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13471**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: JAN KANG-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13473**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**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 PageFOR LINE NUMBER:
(check only one)

PAGE 67 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: KATHY CHAIX-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13474**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: JENNIFER LEVY-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13475**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: BRIDGET QUINN-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13476**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**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 PageFOR LINE NUMBER:
(check only one)

PAGE 68 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. FEINSTEIN FOR SENATE 2018

Mailing Address 918 PENNSYLVANIA AVE SE

City
WASHINGTONState
DCZip Code
20003

Purpose of Disbursement

ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED
Candidate Name**FEINSTEIN, DIANE, , ,**

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: CA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00539890**Transaction ID : EXPB13461**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF MARIA

Mailing Address PO BOX 12740

City
SEATTLEState
WAZip Code
98111

Purpose of Disbursement

ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED
Candidate Name**CANTWELL, MARIA, , ,**

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: WA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00349506**Transaction ID : EXPB13465**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF MAZIE HIRONO

Mailing Address PO BOX 677

City
HONOLULUState
HIZip Code
96809

Purpose of Disbursement

ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED
Candidate Name**HIRONO, MAZIE, , ,**

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: HI

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00420760**Transaction ID : EXPB13467**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 69 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. GILLIBRAND FOR SENATE

Mailing Address 313 C STREET, NE

City
WASHINGTONState
DCZip Code
20002

Purpose of Disbursement

ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

GILLIBRAND, KIRSTEN ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: NY

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00413914**Transaction ID : EXPB13462**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HEIDI FOR SENATE

Mailing Address PO BOX 1577

City
BISMARCKState
NDZip Code
58502

Purpose of Disbursement

ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

HEITKAMP, HEIDI, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: ND

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00505552**Transaction ID : EXPB13468**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JACKIE SPEIER FOR CONGRESS

Mailing Address P.O. BOX 112

City
BURLINGAMEState
CAZip Code
94011

Purpose of Disbursement

ERMK: WENDY SOONE-BRODER-TRANSMITTED BY CHECK. PAC LIMIT

NOT AFFECTED

Candidate Name

SPEIER, JACKIE, , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: CA

District: 14

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00443705**Transaction ID : EXPB13477**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 70 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. JUDY CHU FOR CONGRESS

Mailing Address 16633 VENTURA BLVD # 1008

City
ENCINOState
CAZip Code
91436

Purpose of Disbursement

ERMK: WENDY SOONE-BRODER-TRANSMITTED BY CHECK. PAC LIMIT

NOT AFFECTED

Candidate Name

CHU, JUDY, , ,

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State: CA

District: 27

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00458125**Transaction ID : EXPB13478**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KLOBUCHAR FOR MINNESOTA

Mailing Address PO BOX 4146

City
ST PAULState
MNZip Code
55104

Purpose of Disbursement

ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

KLOBUCHAR, AMY, , ,

Office Sought:

☐

House

☒

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify)

State: MN

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00431353**Transaction ID : EXPB13463**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MCCASKILL SENATE FUND

Mailing Address PO BOX 300077

City
ST LOUISState
MOZip Code
63130

Purpose of Disbursement

ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

MCCASKILL, CLAIRE, , ,

Office Sought:

☐

House

☒

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State: MO

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00577148**Transaction ID : EXPB13466**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 71 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: JANE HARPER-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NV

District: 03

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		19		2017

FEC Identification Number

C C00606939**Transaction ID : EXPB13455**

Amount of Each Disbursement this Period

20.18

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: ROBERT HAZAGA-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NV

District: 03

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		19		2017

FEC Identification Number

C C00606939**Transaction ID : EXPB13456**

Amount of Each Disbursement this Period

20.18

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: NORMA SHULMAN-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NV

District: 03

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		19		2017

FEC Identification Number

C C00606939**Transaction ID : EXPB13457**

Amount of Each Disbursement this Period

20.18

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

60.54

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 72 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: MARILYN LODEN-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: NV

District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00606939**Transaction ID : EXPB13458**

Amount of Each Disbursement this Period

20.18

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City
HENDERSONState
NVZip Code
89074

Purpose of Disbursement

ERMK: ELIZABETH ARNDORFER-TRANSMITTED BY CHECK. PAC LIMIT

NOT AFFECTED

Candidate Name

ROSEN, JACKY, , ,

Office Sought:

☒ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: NV

District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00606939**Transaction ID : EXPB13459**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STABENOW FOR US SENATE

Mailing Address P.O. BOX 4945

City
EAST LANSINGState
MIZip Code
48826

Purpose of Disbursement

ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

STABENOW, DEBBIE, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MI

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00344473**Transaction ID : EXPB13464**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

525.18

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 73 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISONState
WIZip Code
53701

Purpose of Disbursement

ERMK: ROBIN BASS-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

BALDWIN, TAMMY, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: WI

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C C00326801**Transaction ID : EXPB13469**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELECTING WOMEN SAN FRANCISCO PAC

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Purpose of Disbursement

ERMK: GRETCHEN SISSON-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

ELECTING WOMEN SAN FRANCISCO PAC

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	6			2	0	1	7		

FEC Identification Number

C C00585687**Transaction ID : EXPB13495**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: NANCY HAYES-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	6			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13480**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2005.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: TOD COHEN-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	7				2	6						2	0	1	7

FEC Identification Number

C C00500843**Transaction ID : EXPB13481**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: JENNIFER DIBRIENZA-TRANSMITTED BY CHECK. PAC LIMIT

NOT AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	7				2	6						2	0	1	7

FEC Identification Number

C C00500843**Transaction ID : EXPB13482**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: ELIZABETH COLTON-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	7				2	6						2	0	1	7

FEC Identification Number

C C00500843**Transaction ID : EXPB13488**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**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 PageFOR LINE NUMBER:
(check only one)

PAGE 75 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: JOSIE SHIFF-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	7				2	6						2	0	1	7

FEC Identification Number

C C00500843**Transaction ID : EXPB13489**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: SUSANNE STEWART-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	7				2	6						2	0	1	7

FEC Identification Number

C C00500843**Transaction ID : EXPB13492**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: DANA PHILLIPS-TRANSMITTED BY CHECK. PAC LIMIT NOT

AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House☒ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	7				2	6						2	0	1	7

FEC Identification Number

C C00500843**Transaction ID : EXPB13496**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2005.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: LYNNE ROYER-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	6			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13497**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELIZABETH FOR MA INC

Mailing Address PO BOX 290568

City
BOSTONState
MAZip Code
02129

Purpose of Disbursement

ERMK: GRETCHEN SISSON-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

WARREN, ELIZABETH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	6			2	0	1	7		

FEC Identification Number

C C00500843**Transaction ID : EXPB13498**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GILLIBRAND FOR SENATE

Mailing Address 313 C STREET, NE

City
WASHINGTONState
DCZip Code
20002

Purpose of Disbursement

ERMK: SUSANNE STEWART-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

GILLIBRAND, KIRSTEN ELIZABETH, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NY

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	6			2	0	1	7		

FEC Identification Number

C C00413914**Transaction ID : EXPB13494**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2005.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 77 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. JACKIE SPEIER FOR CONGRESS

Mailing Address P.O. BOX 112

City
BURLINGAMEState
CAZip Code
94011

Purpose of Disbursement

ERMK: KATHLEEN HARRIS-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

SPEIER, JACKIE, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 14

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	6			2	0	1	7		

FEC Identification Number

C C00443705**Transaction ID : EXPB13483**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JUDY CHU FOR CONGRESS

Mailing Address 16633 VENTURA BLVD # 1008

City
ENCINOState
CAZip Code
91436

Purpose of Disbursement

ERMK: KATHLEEN HARRIS-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

CHU, JUDY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 27

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	6			2	0	1	7		

FEC Identification Number

C C00458125**Transaction ID : EXPB13486**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KAMALA HARRIS FOR SENATE

Mailing Address 777 S FIGUEROA ST STE 4050

City
LOS ANGELESState
CAZip Code
90017

Purpose of Disbursement

ERMK: SUSANNE STEWART-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

HARRIS, KAMALA, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: CA

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	6			2	0	1	7		

FEC Identification Number

C C00571919**Transaction ID : EXPB13491**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 78 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. KAREN BASS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		26		2017

Mailing Address 777 S. FIGUEROA STREET SUITE 4050

City
LOS ANGELESState
CAZip Code
90017

Purpose of Disbursement

ERMK: KATHLEEN HARRIS-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

BASS, KAREN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 37

Category/
Type

FEC Identification Number

C C00476523**Transaction ID : EXPB13487**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KLOBUCHAR FOR MINNESOTA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		26		2017

Mailing Address PO BOX 4146

City
ST PAULState
MNZip Code
55104

Purpose of Disbursement

ERMK: SUSANNE STEWART-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

KLOBUCHAR, AMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: MN

District:

Category/
Type

FEC Identification Number

C C00431353**Transaction ID : EXPB13490**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PRAMILA FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		26		2017

Mailing Address PO BOX 20753

City
SEATTLEState
WAZip Code
98102

Purpose of Disbursement

ERMK: KATHLEEN HARRIS-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

JAYAPAL, PRAMILA, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: WA

District: 07

Category/
Type

FEC Identification Number

C C00605592**Transaction ID : EXPB13485**

Amount of Each Disbursement this Period

5.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

15.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 79 OF 81

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

WOMENCOUNT PAC

Full Name (Last, First, Middle Initial)

A. SCHAKOWSKY FOR CONGRESS

Mailing Address P.O. BOX 5130

City
EVANSTONState
ILZip Code
60204

Purpose of Disbursement

ERMK: KATHLEEN HARRIS-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

SCHAKOWSKY, JAN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: IL

District: 09

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	6			2	0	1	7		

FEC Identification Number

C C00327023**Transaction ID : EXPB13484**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TAMMY BALDWIN FOR SENATE

Mailing Address P.O. BOX 696

City
MADISONState
WIZip Code
53701

Purpose of Disbursement

ERMK: SUSANNE STEWART-TRANSMITTED BY CHECK. PAC LIMIT NOT
AFFECTED

Candidate Name

BALDWIN, TAMMY, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: WI

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	6			2	0	1	7		

FEC Identification Number

C C00326801**Transaction ID : EXPB13493**

Amount of Each Disbursement this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10.00

42440.72

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 80 OF 81

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HANSON BRIDGETT LLP

Nature of Debt (Purpose):

LEGAL AND COMPLIANCE

Mailing Address 425 MARKET STREET, 26TH FLOOR

City
SAN FRANCISCOState
CAZip Code
94105

Outstanding Balance Beginning This Period

1305.00

Transaction ID : PAYD3367

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1305.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VIEW AVENUE GROUP

Nature of Debt (Purpose):

COMPLIANCE/REPORTING

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Outstanding Balance Beginning This Period

3007.50

Transaction ID : PAYD9592

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3007.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VIEW AVENUE GROUP

Nature of Debt (Purpose):

COMPLIANCE SERVICES

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Outstanding Balance Beginning This Period

1890.94

Transaction ID : PAYD11385

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1890.94

1) **SUBTOTALS** This Period This Page (optional)..... ►

6203.44

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 81 OF 81

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10
NAME OF COMMITTEE (In Full)
WOMENCOUNT PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VIEW AVENUE GROUPNature of Debt (Purpose):
COMPLIANCE SERVICES

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Outstanding Balance Beginning This Period

2501.05

Transaction ID : PAYD12409

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2501.05

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

VIEW AVENUE GROUPNature of Debt (Purpose):
COMPLIANCE SERVICES

Mailing Address 393 7TH AVENUE, SUITE 301

City
SAN FRANCISCOState
CAZip Code
94118

Outstanding Balance Beginning This Period

1282.50

Transaction ID : PAYD12795

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1282.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

3783.55

2) **TOTALS** This Period (last page this line number only)..... ►

9986.99

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

9986.99