Image# 15951517897			_	PA	GE 1 / 6
FEC AN	PORT OF F D DISBURS Other Than An Author	SEMENTS	;	Office Lise Only	
1. NAME OF TYP	e or print ▼	Example: If typing	a, type	Office Use Only	
COMMITTEE (in full)		over the lines.	g, type 12FE	4M5	
Women Against Hillary PA	AC				
ADDRESS (number and street)	O. Box 2970				
Check if different					
than previously S reported. (ACC)	parks		NV	89432	-
2. FEC IDENTIFICATION NUMB			STATE	ZIP CC	DDE 🔺
C C00566968	3. IS RE	THIS NE) OR	AMENDED (A)	
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: 	Report Due On:		ay 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
April 15	Apr 2	D (M4) Ju	Il 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
Quarterly Report (Q1) July 15	(c) 12-Day PRE -Election	Primary (12P)	Ge	neral (12G)	Runoff (12R)
Quarterly Report (Q2) October 15 Quarterly Report (Q3)	Report for the:	Convention (12	2C) Sp	ecial (12S)	
January 31 Year-End Report (YE)	Election	on /		in the State	of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST -Election Report for the:	General (30G)	Ru	noff (30R)	Special (30S)
X Termination Report (TER)	Election	on /	D = D / Y = Y =	in the State	of
5. Covering Period	01 / Y Y Y Y 01 2015	through	06 / D	D / Y Y Y Y 2015	
I certify that I have examined this Re	eport and to the best of n	ny knowledge and be	elief it is true, corre	ct and complete.	
Type or Print Name of Treasurer	Ir. Scott Carlton Kennedy				
Signature of Treasurer	Carlton Kennedy	[Electronically]	Filed] Date	M M / D D / 06 22	2015
NOTE: Submission of false, erroneous,	or incomplete information	may subject the perso	on signing this Repo	rt to the penalties of 2	U.S.C. §437g.
Office Use Only				FEC FOF Rev. 12/2	

06/22/2015 19 : 55

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IIIage# 13531317650			
FEC Form	1 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Cor	mmittee Name		
Women Aga	inst Hillary PAC		
Report Covering t	the Period: From:		To: 06 / 22 / 2015
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on F Janua	1 -1 -1 -1		169.00
(b) Cash on F Beginning	Hand at of Reporting Period	269.00	
(c) Total Rece	sipts (from Line 19)	0.00	100.00
6(c) for Co	add Lines 6(b) and olumn A and Lines S(c) for Column B)	269.00	269.00
7. Total Disburser	ments (from Line 31)	269.00	269.00
8. Cash on Hand Reporting Perio (subtract Line 2		0.00	0.00
the Committee	igations Owed TO (Itemize all on Id/or Schedule D)	0.00	
10. Debts and Obli the Committee Schedule C an		0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

Page 3

Write or Type Committee Name

Women Against Hillary PAC

FEC Form 3X (Rev. 06/2004)

I. Receipts	COLUMN A	COLUMN B					
	Total This Period	Calendar Year-to-Date					
. Contributions (other than loans) From:							
(a) Individuals/Persons Other							
Than Political Committees	0.00	0.00					
(i) Itemized (use Schedule A)							
	0.00	100.00					
(ii) Unitemized	0.00	100.00					
(iii) TOTAL (add	0.00	100.00					
Lines 11(a)(i) and (ii)	0.00	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7					
(b) Political Party Committees	0.00	0.00					
(b) Political Party Committees		7 7 7					
(c) Other Political Committees (such as PACs)	0.00	0.00					
(d) Total Contributions (add Lines	7 7						
11(a)(iii), (b), and (c)) (Carry							
Totals to Line 33, page 5)	0.00	100.00					
. Transfers From Affiliated/Other							
Party Committees	0.00	0.00					
	7 7						
. All Loans Received	0.00	0.00					
. Loan Repayments Received	0.00	0.00					
. Offsets To Operating Expenditures	/7. /7. /*						
(Refunds, Rebates, etc.)							
(Carry Totals to Line 37, page 5)	0.00	0.00					
. Refunds of Contributions Made	7 7						
to Federal Candidates and Other							
Political Committees	0.00	0.00					
. Other Federal Receipts							
(Dividends, Interest, etc.)	0.00	0.00					
. Transfers from Non-Federal and Levin Funds	7 7						
(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					
Total Receipts (add Lines 11(d),	0.00	400.00					
12, 13, 14, 15, 16, 17, and 18(c))	0.00	100.00					
Total Endaral Dagainta							
. Total Federal Receipts	0.00						
(subtract Line 18(c) from Line 19)►	0.00	100.00					

DETAILED SUMMARY PAGE

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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	0.00	0.0
(c) Total Operating Expenditures	0.00	0.0
(add 21(a)(i), (a)(ii), and (b))► Transfers to Affiliated/Other Party		
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures (use Schedule E)	0.00	0.00
Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	238.00	238.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))►	238.00	238.00
Other Disbursements	31.00	31.00
Endered Election Activity (2,11,5,0, \$421(20))		
Federal Election Activity (2 U.S.C. §431(20))(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))►	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	269.00	269.00
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	269.00	269.00

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DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures			
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	100.00	
 Total Contribution Refunds (from Line 28(d)) 	238.00	238.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	-238.00	-138.00	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	0.00	0.00	
 Offsets to Operating Expenditures (from Line 15, page 3) 	0.00	0.00	
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00	

SCHEDULE B (FEC Form 3X)					OR LINE NUMBER: PAGE 6 OF 6											
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the	(C	hec	k oi 21	-	y one)							<u> </u>		
		Detailed Summary Page			27		< 28a	-	23 28b		24 28c		25 29	30b		
	y information copied from such Reports and Staten for commercial purposes, other than using the nam					rson	for the									
\backslash	NAME OF COMMITTEE (In Full)															
	Women Against Hillary PAC															
	Full Name (Last, First, Middle Initial)					Data	4 D:	- l								
А.	Mr. Scott Carlton Kennedy						Date c	_			Y	V	V	V		
	Mailing Address 9705 State Route 267, Suite 2						06 22 2015									
	,	State Zip Code					Transaction ID : SB28A.4122									
	Truckee Purpose of Disbursement	CA 96161				_										
	Refund to Close Checking Account		0	10			Amour	nt of	Each	Disbu	rsem	ent	this I	Period		
	Candidate Name		Cate				238.00									
	Women Against Hillary PAC Office Sought: House Disbursen	nent For:	Т	ype		_			7	-	7					
		Primary General														
		Other (specify)														
	State: District: Full Name (Last, First, Middle Initial)					_										
В.	rui Name (Last, Filst, Middle Initial)						Date c	of Di	sburse	ement						
							M M	/	D	D /	Y	Y	Y	Y		
	Mailing Address						<u> </u>				L	-	-			
	City S	State Zip Code														
	Purpose of Disbursement		_							D : 1						
Candidate Name					_		Amount of Each Disbursement this Period									
			Cate Ty	egor ype			L.,		,		7					
	Office Sought: House Disbursen															
		Primary General Other (specify) ▼														
	State: District:															
	Full Name (Last, First, Middle Initial)	e (Last, First, Middle Initial)														
C.							Date c				N	V	V	V		
	Aailing Address															
	City	State Zip Code														
Purpose of Disbursement				_												
Candidate Name			Category/ Type				Amount of Each Disbursement this Period									
		nent For: Primary General Other (specify) v														
_	State: District:															
s	UBTOTAL of Disbursements This Page (optional)				•				7		7		238	.00		
т	OTAL This Period (last page this line number only)								,		7		238	.00		